Only

STATEMENT OF

PAGE 1 / 213 =

FEC FORM 1		OR	GANI	IZA T	ΓΙΟΙ	N										•				
1. NAME OF COMMITTEE (ir	n full)		eck if name)	Examp			уре		12	FE4	1M5		ffice	Use	Only				_
NRCC	,	_		1 1 1	1 1 1	1 1	1 1	1 1		1 1		ı	1 1	ı		_	ı	1 1	ı	I
l																				_
		320 FIRST S	TREET SE																	
ADDRESS (number a	,																			
is changed																				╛
		WASHINGTO											200	003		<u></u>				
		CITY	•							SIA	TE 🛦	\				ZIP	COL	DE▲		
COMMITTEE'S E-MA	AIL ADDRE																			
		kdavis@h	idafec.co	m 																
		Optional Sec	ond E-Mai	l Addres	SS															
		kwilliams	@nrcc.c	org																╛
COMMITTEE'S WEB	PAGE ADI	DRESS (URL)																		
		www.nrcc.org) 																	
		1	1 1 1	1 1 1	1 1 1	1 1	1 1	1 1	ı	1 1	ı	1	1 1		1	1 1	ı	1 1	1	ı
																				_
2. DATE 10	M / D 24		22																	
3. FEC IDENTIFIC	CATION NU	JMBER ▶	С	C000	75820		_													
4. IS THIS STATEM	MENT	NEW (N)	OF	₹	×	AME	NDE) (A)												
I certify that I have e	examined th	is Statement a	and to the	best of	my kno	wledge	and	belief	it is	true	e, co	rrect	and	d co	mple	te.				
Type or Print Name	of Treasure	Davis, Keith	A., , ,																	
Signature of Treasure	er <i>Davis</i> ,	Keith A., , ,			[E	ectronic	ally Fi	iled]	D	ate		10	_	′ □	24	′	Y	2022		Y
NOTE: Submission of	false, errone	eous, or incomp												pen	altie	s of	52 L	J.S.C.	§30	109.
Office Use					Fe	r furthe deral El	ection (Commi		tact:					EC Revis					_

Toll Free 800-424-9530

Local 202-694-1100

FEC	Form	1 (Revised 03/2022)	Page 2
	TYPE C	DF COMMITTEE:	
	Candid	date Committee:	
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete tinformation below.)	ne candidate
	Name Candid		
	Candid Party	date Affiliation Office Sought: House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
		ne of didate	
	Party (Committee:	
	(d) x	This committee is a NAT (National, State PED (Democrat	ic, n, etc.) Party
	_	Topusion	
	Politica	al Action Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a:
		Corporation Corporation w/o Capital Stock Labor (Organization
		Membership Organization Trade Association Cooper	_
			alivo
		In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	(g)	This committee is an independent expenditure-only political committee (Super PAC).	
		In addition, this committee is a Lobbyist/Registrant PAC.	
	(h)	This committee is a political committee with both contribution and non-contribution accounts (Hybrid F	PAC)
	('')		,,.
		In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint F	Fundraising Representative:	
		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two	or more political
	(i)	committees/organizations, at least one of which is an authorized committee of a federal candidate.	
	(j)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	nmittees Participating in Joint Fundraiser	
	1.	C	
	_		

•	FEC Form 1 (Revised 0	2/2009)	Page 3
٧	Irite or Type Committee Name		
	NRCC		
6.		ganization, Affiliated Committee, Joint Fundraising Representative, o	r Leadership PAC Sponsor
	COLE COMBINED C	OMMITTEE	
	Mailing Address	12176 CHANCERY STATION CIRCLE	
		ıRESTON ı VA ı	20190
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization x Joint Fundraising Representative	ve Leadership PAC Sponso
			_
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the person i	n possession of committee
	Davis, Keith	A.,,,	
	ruii Naille	320 First Street SE	
	Mailing Address	3201 hst Street SE	
		Washington	20003
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
			7000
	Treasurer	Telephone number	02 - 429 - 7000
3.		address (phone number optional) of the treasurer of the committee; a	and the name and address of
	any designated agent (e.g., a		
	Full Name Davis, Keith	A., , ,	
	of Treasurer		
	Mailing Address	320 First Street SE	
		Washington DC	20003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	2

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent	Williams, Katy, , ,		
Mailing Address	320 First Street SE		
	Washington	DC	20003
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasur		umber 2	202 - 429 - 7000
	Depositories: List all banks or other depositories in which the comm es or maintains funds.	ittee deposits t	funds, holds accounts, rents
Name of Bank, D	epository, etc.		
	Wells Fargo		
Mailing Address	1753 Pinnacle Drive		
	McLean	VA	22102
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	Country Club Bank	1 1 1 1 1	
Mailing Address	P.O. Box 410889		
	Kansas City	MO	64141
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h),

Mailing Address	C/O RED CURVE SOLUTIONS 138 CONANT STREET 2ND FLOOR		
Relationship:	BEVERLY CITY	MA MA STATE ▲	01915
	d Organization Affiliated Committee	Fundraising Represent	tative Leadership PAC Sp
	y by name, address (phone number – optional)		
Designated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	CITY	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi r	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spons
BANKS VIOTOR			
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE A	ZIP CODE ▲
	d Organization 🔃 Affiliated Committee 🗶 Joint	Fundraising Represent	Leadership 1710 op
esignated Agent: Identif	y by name, address (phone number – optional)		Leadership 1710 op
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			
esignated Agent: Identif			
esignated Agent: Identif			
esignated Agent: Identif	y by name, address (phone number – optional)	STATE A	
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds. 102 Main Street	STATE A elephone Number the committee deposit	ZIP CODE s funds, holds accounts, rents
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds. Terit Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundra	ising Representative	, or Leadership PAC Sponsor
	JACOBS VICTOR	Y COMMITTEE		
	Mailing Address	228 S WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
3.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.		by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name	CITY		
3.	Full Name	CITY	STATE A	ZIP CODE A
3.	Full Name	CITY		
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	CITY CITY Tele ries: List all banks or other depositories in which the intains funds.	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	CITY A Tele Ties: List all banks or other depositories in which the	STATE A	ZIP CODE A
3.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma Name of Bank, Bank O	CITY CITY Tele ries: List all banks or other depositories in which the intains funds.	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or matching boxes or matching between the positors, etc.	CITY CITY Tele ries: List all banks or other depositories in which the intains funds. f Nevada	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or matching boxes or matching between the positors, etc.	CITY CITY Tele ries: List all banks or other depositories in which the intains funds. f Nevada	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
PARNELL VICTO	DRY COMMITTEE		
Mailing Address	PO BOX 1488		
	CRANBERRY TOWNSHIP	PA	16066
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte		nt Fundraising Represent	ative Leadership PAC Sp
Connecte	Affiliated Committee Jointy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
Connecte		nt Fundraising Represent	ative Leadership PAC Sp
Connecte		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identification		nt Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	by by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identification	by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	by by name, address (phone number – optional) CITY CITY City Dries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connecte esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, BMO	by by name, address (phone number – optional) CITY CITY City Dries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	cories: List all banks or other depositories in which aintains funds. Harris Bank NA	STATE A Telephone Number	ZIP CODE A
connected esignated Agent: Identification of the position of t	cories: List all banks or other depositories in which aintains funds. Harris Bank NA	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spor
FORT VICTORY I	-UND 		
Mailing Addings	332 W LEE HWY		
Mailing Address	#303		
			20186
B 1 % 1	WARRENTON	VA	
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY A		ZIP CODE A
Full Name	CITY A		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or mail	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposit boxes or main arms of Bank, First Nepository, etc.	CITY A City A ries: List all banks or other depositories in whitintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposite boxes or maintain the many and the maintain the mainta	CITY ▲ ries: List all banks or other depositories in white intains funds. ational Bank	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposit boxes or main arms of Bank,	CITY ▲ ries: List all banks or other depositories in white intains funds. ational Bank	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:				
1.			FEC I	D number	С
2.			FEC I	D number	С
3.			FEC I	D number	С
4			FEC I	D number	С
	=	committee, Joint I	Fundraising Re	presentativ	e, or Leadership PAC Spor
SMITH VICTORY					
Mailing Address	824 S. MILLEDGE AVEN	IUE			
	SUITE 101				
	ATHENS			GA	30605
Relationship:	(CITY A		STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliate	d Committee	Joint Fundraisin	g Represent	ative Leadership PAC S
	y by name, address (phone	•	,		
Full Name					
Full Name					
	Cl	TY A		STATE A	ZIP CODE A
Mailing Address	Cl		Telephone N		
Mailing Address TITLE OR POSITION	ories: List all banks or othe	TY 🛦	Telephone N	lumber	
Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mane of Bank, Prospe	ories: List all banks or othe	TY 🛦	Telephone N	lumber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail	ories: List all banks or othe aintains funds.	TY 🛦	Telephone N	lumber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or management of Bank, Prospersion, etc.	ories: List all banks or othe aintains funds.	TY 🛦	Telephone N	lumber	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or management of Bank, Prospersion, etc.	ories: List all banks or othe aintains funds.	TY 🛦	Telephone N	lumber	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor WALBERG VICTORY FUND Mailing Address PO BOX 1362 JACKSON Relationship: CITY A STATE A ZIP CODE A Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Leadership PAC Sponsor Affiliated Committee Mailing Address Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address	3. 4. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC S WALBERG VICTORY FUND Mailing Address PO BOX 1362 Mailing Address PO BOX 1362 STATE A ZIP CODE Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PA Belationship: CITY A STATE A ZIP CODE Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PA Besignated Agent: Identify by name, address (phone number – optional) Full Name						
WALBERG VICTORY FUND Mailing Address PO BOX 1362 JACKSON Relationship: CITY A STATE A ZIP CODE A Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Besignated Agent: Identify by name, address (phone number – optional)	3.	Full Name					
WALBERG VICTORY FUND Mailing Address PO BOX 1362 JACKSON Relationship: CITY A STATE A ZIP CODE A Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Besignated Agent: Identify by name, address (phone number – optional)	3.						
WALBERG VICTORY FUND Mailing Address PO BOX 1362 JACKSON MI 49204	3. 4. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC S WALBERG VICTORY FUND Mailing Address PO BOX 1362 JACKSON MI 49204	Connected		Affiliated Committee			
WALBERG VICTORY FUND Mailing Address PO BOX 1362	3. 4. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC S WALBERG VICTORY FUND Mailing Address PO BOX 1362	Relationship:		CITY A			ZIP CODE ▲
WALBERG VICTORY FUND	3. FEC ID number C 4. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC S WALBERG VICTORY FUND	-	JACKSON			, , MI -	49204
	3. FEC ID number C 4. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC S	Mailing Address	PO BOX 1362	2			
	3. FEC ID number C 4. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC S						
	3. FEC ID number C			Affiliated Committee, Join	nt Fundraising	Representative	e, or Leadership PAC Sponse
	EEC ID number						
5. FEC ID number	3				 _ , FE	EC ID number	С
3. FEC ID number C	1. FEC ID number				 _ , FE	EC ID number	С

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi n	• '		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
BOST VICTORY	FUND 		
Mailing Address	824 S. MILLEDGE AVENUE		
Maining Address	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Spanish
esignated Agent: Identif	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail ame of Bank, epository, etc.	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page $\underline{^{13}}$ of $\underline{^{213}}$

h). Joint Fundraisi	1	FFO IF	C
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funds	raising Representative	e, or Leadership PAC Spon
KATKO VICTOR	Y FUND		
Mailing Address	228 S. WASHINGTON STREET		1 1 1 1 1 1 1 1 1
	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC S
	Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identii Full Name Mailing Address	by by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif	by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, Frank	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, Frank	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	cories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:			
	1.		FEC ID r	number	C
	2.		FEC ID r	number	С
	3.		FEC ID r	number	C
	4.		FEC ID r	number	C
6.	=	Organization, Affiliated Committee, Joint Fund	raising Repre	esentative	, or Leadership PAC Sponsor
	Mailing Address	47 FLINTLOCK DRIVE			
		SHIRLEY		NY	11967
	Relationship:	CITY A		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	nt Fundraising F	Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)			
	Full Name				
	Mailing Address				
	TITLE OR POSITION	▼ CITY ▲	ST	ATE 🛦	ZIP CODE ▲
			elephone Nun	nber	
9.	Banks or Other Deposito safety deposit boxes or ma		the committe	e deposits	funds, holds accounts, rents
	Depository, etc.				
	Mailing Address	277 S. Washington Street			
		Alexandria		Ŭ VA □	22314
ı		CITY A	ST	ATE 🔺	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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5(g) c	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected HUIZENGA VICT	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. Box 2485		
		Springfield	VA	22152
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	undraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	y by name, address (phone number – optional)		
	Mailing Address			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tale	. t	
		iele	phone Number	
	safety deposit boxes or management boxes or ma	ries: List all banks or other depositories in which the		es funds, holds accounts, rents
	Name of Bank, Chemi Depository, etc.	ries: List all banks or other depositories in which the aintains funds.		s funds, holds accounts, rents
	safety deposit boxes or management boxes or ma	ries: List all banks or other depositories in which the aintains funds.		s funds, holds accounts, rents
	Name of Bank, Chemi Depository, etc.	ries: List all banks or other depositories in which the aintains funds. Cal Bank 333 E. Main Street	e committee deposit	
	Name of Bank, Chemi Depository, etc.	ries: List all banks or other depositories in which the aintains funds.		s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
ROUZER CONG	RESSIONAL TRUST		
I			
Mailing Address	P.O. Box 701		
	Clayton	NC	27528
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
· ·			
Connecte		nt Fundraising Represent	ative Leadership PAC S
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC S
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	Leadership PAC S
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC S
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Connecte esignated Agent: Identif	Affiliated Committee Joint	nt Fundraising Representation	
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee Joint J		
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee Joint J	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Affiliated Committee y Joint	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or marketed to the state of the state	Affiliated Committee y Jointy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Connected sesignated Agent: Identification of Sanks, First First Full Name Connected Sesignated Agent: Identification of Sanks or Other Deposite Sa	Affiliated Committee y Joint	STATE A Telephone Number	ZIP CODE A
connected sesignated Agent: Identification of the position of	Affiliated Committee y Jointy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, First F	Affiliated Committee y Joint Strain	STATE A Telephone Number	ZIP CODE A
Connected esignated Agent: Identification of the position of t	Affiliated Committee y Joint Strain	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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or(h). Joint Fundraisi	ng Participant:	FEC ID number	C
2.		FEC ID number	C
		FEC ID number	С
3.		FEC ID number	C
4.		T LO ID Humber	
	l Organization, Affiliated Committee, Joint Fundra	ising Representative	, or Leadership PAC Sponsor
RODNEY DAVIS	VICTORY FUND		
Mailing Address	P.O. Box 9891		
	Arlington	VA VA	22219
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponse
Full Name			
		STATE A	ZIR CODE A
	CITY A	STATE A	ZIP CODE A
Mailing Address	I ▼		ZIP CODE A
Mailing Address TITLE OR POSITION	Telepries: List all banks or other depositories in which the aintains funds.	STATE ▲ ephone Number	
Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	pries: List all banks or other depositories in which the aintains funds. Bank 1 South Main Street	STATE A ephone Number he committee deposits	s funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	pries: List all banks or other depositories in which the aintains funds. Bank	STATE ▲ ephone Number	

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	2345 GRAND BLVD SUITE 2400		
	KANSAS CITY	MO MO	64108
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identify Full Name	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		
Full Name Mailing Address TITLE OR POSITION	CITY CITY Tel pries: List all banks or other depositories in which taintains funds.	STATE ▲ ephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail name of Bank, Flagst	CITY CITY Tel pries: List all banks or other depositories in which taintains funds.	STATE ▲ ephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Tel pries: List all banks or other depositories in which taintains funds. ar	STATE ▲ ephone Number	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi n		FEC ID number	С
		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		TEO ID Hambol	0
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TURNER VICTOR	RY FUND		
Mailian Addus a	824 S. MILLEDGE AVENUE		
Mailing Address	SUITE 101		
	ATHENS	, GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE A
riciationship.		SIAIE	ZIF CODE A
	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spanish
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	y by name, address (phone number – optional) CITY To ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional) CITY CITY To ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full NameMailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY To ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full NameMailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mailing ame of Bank, Summ	y by name, address (phone number – optional) CITY CITY To ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY To ries: List all banks or other depositories in which aintains funds. it Bank	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY To ries: List all banks or other depositories in which aintains funds. it Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
4.			
	d Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
BRAD WENSTR	UP VICTORY FUND		
Mailing Address	PO BOX 30844		
J			
	BETHESDA	MD MD	20824
		STATE ▲	ZIP CODE ▲
Relationship:	CITY A ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
Connecte			ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee		ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee		ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee Joint y Joint fy by name, address (phone number – optional)	Fundraising Represent	
esignated Agent: Identi	Affiliated Committee Affiliated Committee	Fundraising Representation	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market	Affiliated Committee Affiliated Committee Ty Joint To CITY Telepories: List all banks or other depositories in which	Fundraising Representation	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee Ty Joint Affiliated Committee Ty Joint Affiliated Committee Ty Joint CITY CITY Teleprises: List all banks or other depositories in which naintains funds. National Bank of Tennessee	Fundraising Representation	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	g Participant:			
1.			FEC ID number	С
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	С
			_	
	Organization, Affi	liated Committee, Joint Fu	ndraising Representati	ve, or Leadership PAC Spons
TEAM LAHOOD				
	1 824 S. MILLEDO	GE AVENUE		
Mailing Address	SUITE 101			
	ATHENS		GA GA	30605
Relationship:		CITY A	STATE A	XIP CODE ▲
Full Name				
Mailing Address				
Mailing Address				
Mailing Address				
Mailing Address TITLE OR POSITION		CITY A	STATE A	ZIP CODE A
			STATE A Telephone Number	

FEC Form 1S (Revised 02/2017)

1.		FEC ID number	C
2.		FEC ID number	C
3.			
4		FEC ID number	[C]
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
ANDY BARR VIC	CTORY COMMITTEE		
Mailing Address	#303		
	WARRENTON	VA	20186
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	ed Organization Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
Pesignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit afety deposit boxes or make the property of the property of the position of the property of the position of the property	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which naintains funds. Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\underline{^{23}}$ of $\underline{^{213}}$

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	I Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 2456		
	ODDINOTISI D		00450
	SPRINGFIELD	VA	22152
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee	Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi		Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi		Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Represent	
Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposites afety deposit boxes or markets.	fy by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the period of Bank, Depository, etc.	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds. endent Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page $\underline{^{24}}$ of $\underline{^{213}}$

1.		FEC II	0 number	С
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4.		FEC II) number	C
lame of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Re	oresentativ	e, or Leadership PAC Spon
TEAM GALLAGH	ER		1 1 1 1	
1				
Mailing Address	1915 SOUTH WEBSTER AVE			
	STE D			
	GREEN BAY	I	WI	54301
Relationship:	CITY ▲ d Organization Affiliated Committee	X Joint Fundraising	STATE A	ZIP CODE ▲ ative Leadership PAC Sp
Connected				
esignated Agent: Identif	d Organization Affiliated Committee			
Connecter connec	d Organization Affiliated Committee			
esignated Agent: Identif	d Organization Affiliated Committee			ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee y by name, address (phone number – option	onal)	g Represent	ative Leadership PAC Sp
Connected Pesignated Agent: Identify Full Name	Affiliated Committee by by name, address (phone number – option	onal)		ative Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi r	I	FEC ID number	С
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2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
STRONG AMERI	CA FUND		
Mailing Address	824 S MILLEDGE AVE, STE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
		Fundraising Represente	ative Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, Cader	y by name, address (phone number – optional) CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, Cader	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds. Ace Bank	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds. Ace Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisi n	g Participant:			
	1.		FEC	ID number	C
	2.		FEC	ID number	C
	3.		FEC	ID number	C
	4.		FEC	ID number	C
6.	Name of Any Connected WALORSKI VICT	Organization, Affiliated Committee, Joint ORY FUND	Fundraising R	epresentative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 26141			
		ALEXANDRIA		VA	22313
	Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Joint Fundraisi	ng Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optio	nal)		
	Full Name				
	Mailing Address				
		1	, , , , , , 1	1 . 1	1
	TITLE OR POSITION	▼ CITY ▲		STATE ▲	ZIP CODE ▲
			Telephone	Number	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in aintains funds. field First Community Bank 2006 South Glenstone Avenue	which the comr	nittee deposit	s funds, holds accounts, rents
	0				
		Springfield	1	MO	65804
ı		CITY ▲		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraising	Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected C	Organization, Affiliated Committee, Joint Fundrais	sing Representative	or Leadership PAC Sponsor
Mailing Address	1919 OXMOOR ROAD		
	#223 HOMEWOOD	AL	35209
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint F	undraising Representa	tive Leadership PAC Spons
Designated Agent: Identify	by name, address (phone number - optional)		
Full Name			
Mailing Address			
		STATE A	ZIP CODE A
	CITY A	STATE A	ZIP CODE A
Mailing Address	•		ZIP CODE A
Mailing Address TITLE OR POSITION Banks or Other Depositoris safety deposit boxes or main Name of Bank, Ameris	Tele ies: List all banks or other depositories in which the intains funds.	STATE ▲	
Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or main Name of Bank, Ameris Depository, etc.	Tele ies: List all banks or other depositories in which the intains funds.	STATE ▲	
Mailing Address TITLE OR POSITION Banks or Other Depositori safety deposit boxes or main Name of Bank, Ameris	Tele ies: List all banks or other depositories in which th intains funds. Bank	STATE ▲	
Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or main Name of Bank, Ameris Depository, etc.	Tele ies: List all banks or other depositories in which th intains funds. Bank	STATE ▲	

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisi n	ng Participant:			
	1		FEC I	D number	C
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	3.		FEC I	D number	C
	4.		FEC I	D number	C
6.	Name of Any Connected REED VICTORY	Organization, Affiliated Committee, Join	t Fundraising Re	presentative	e, or Leadership PAC Sponsor
	Mailing Address	824 S. MILLEDGE AVENUE			
		SUITE 101			
		ATHENS		GA L	30605
	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	X Joint Fundraisin	ng Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	y by name, address (phone number – opti	onal)		
	Mailing Address	1			
	Mailing Address				
		OLEAN			7ID 00D5 +
	TITLE OR POSITION	▼ CITY ▲		STATE A	ZIP CODE ▲
			Telephone 1	Number	
9.	Banks or Other Depositors safety deposit boxes or many Name of Bank, Depository, etc. Mailing Address		n which the comm	ittee deposit	s funds, holds accounts, rents
		Harrisburg		PA	17101
ı		CITY ▲		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

5(g) or ((h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
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	3.		FEC ID number	C
	4.		FEC ID number	C
_	4.			
6. N		Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	TEAM ESTES		<u> </u>	<u> </u>
	 , , , , , , , , , , , , , , , , , , ,			·
		P.O. BOX 26141		
	Mailing Address	P.U. BUX 20141		
		ALEXANDRIA	VA VA	22313
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	- undraising Representa	ative Leadership PAC Sponsor
D	esignated Agent: Identify	by name address (phone number – optional)		
3. D (Full Name	by name, address (phone number – optional)		
3. D		by name, address (phone number – optional)		
3. D	Full Name	by name, address (phone number – optional)		
3. D	Full Name	by name, address (phone number – optional)		
3. D	Full Name	CITY A	STATE A	ZIP CODE A
3. D	Full Name	CITY A		
3. D	Full Name	CITY A	STATE A	
 . B . sa	Full Name Mailing Address TITLE OR POSITION Janks or Other Depositor afety deposit boxes or ma	CITY CITY Tele ries: List all banks or other depositories in which the sintains funds.	STATE ▲	ZIP CODE 🛦
 . B 3 sa	Full Name Mailing Address TITLE OR POSITION Janks or Other Depositor afety deposit boxes or ma	CITY A Tele ries: List all banks or other depositories in which the	STATE ▲	ZIP CODE 🛦
 . B 3 sa	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or ma	CITY CITY Tele ries: List all banks or other depositories in which the sintains funds.	STATE ▲	ZIP CODE 🛦
 . B 3 sa	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mailane of Bank, Pirst Banks propository, etc.	CITY Tele ries: List all banks or other depositories in which the sintains funds. ank & Trust	STATE ▲	ZIP CODE 🛦
 . B 3 sa	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mailane of Bank, Pirst Banks propository, etc.	CITY Tele ries: List all banks or other depositories in which the sintains funds. ank & Trust	STATE ▲	ZIP CODE 🛦
 . B 3 sa	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mailane of Bank, Pirst Banks propository, etc.	CITY Tele ries: List all banks or other depositories in which the sintains funds. ank & Trust 909 Poydras Street	STATE A	ZIP CODE ZIP CODE s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

1		FEC ID number	C
3. 4.		FEC ID number FEC ID number	C
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
Mailing Address	332 W. LEE HIGHWAY #303		
	WARRENTON	VA VA	20186
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identif	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name			
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or meaning the second control of the	CITY A Te pries: List all banks or other depositories in which	STATE ▲	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY ▲ CITY ▲ Te pries: List all banks or other depositories in which aintains funds. On Bank	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisi	ng Participant:		
	1		FEC ID number	С
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	l Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	MAST VICTORY	COMMITTEE		
		824 S MILLEDGE AVE STE 101		
	Mailing Address			
		ATHENS	GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
8.		Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
	Full Name	, -,,		
	Mailing Address			
	C			
		CITY A	STATE A	ZIP CODE A
	TITLE OR POSITION	1	STATE A	ZIP CODE ▲
	TITLE OR POSITION	N •	STATE A	ZIP CODE A
9.	Banks or Other Deposite safety deposit boxes or m	Te	elephone Number	
9.	Banks or Other Deposite safety deposit boxes or management Name of Bank, Depository, etc.	ories: List all banks or other depositories in which haintains funds. Capital Bank 201 W. 5th Street	elephone Number	

FEC Form 1S (Revised 02/2017)

1.			
		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
MIKE ROGERS V	ICTORY		
Mailing Address	2523 WILSON BOULEVARD		
	#4 		
	ARLINGTON	, , , VA ,	22201
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name			
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address	CITY A	STATE A	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail ame of Bank, TD Ba	CITY A ries: List all banks or other depositories in which aintains funds.	elephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Lanks or Other Depositor afety deposit boxes or mailane of Bank, repository, etc.	CITY CITY ries: List all banks or other depositories in which sintains funds. nk	elephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ig i ai dolpaini		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e. or Leadership PAC Spon
ALLEN VICTORY	_		,
Mailing Address	PO BOX 420521		
	ATLANTA	GA	30342
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sp
esignated Agent: Identi	ry by name, address (phone number – optional)	Fundraising Hepresenta	tive Leadership PAC Sp
		Hundraising Hepresenta	Leadership PAC Sp
esignated Agent: Identif		Fundraising Hepresenta	Leadership PAC Sp
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FEC Form 1S (Revised 02/2017)

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Affiliated Committee			
		ndraising Represe	ntative Leadership PAC S
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CITY A		STATE A	ZIP CODE ▲
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	Teleph	hone Number	
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FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
		FEC ID number	С
4.			
=	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
FERGUSON VIC	TORY FUND		
Mailing Address	P.O. BOX 420304		
Mailing Address			
	, ATLANTA	CA	30343
		L GA	30342
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Represent	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	d Organization Affiliated Committee Joint	STATE A Telephone Number	ZIP CODE A

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h). Joint Fundraisi	ig raiticipant.			
1		FEC II	O number	C
2.		FEC II	O number	С
3.		FEC II	O number	С
4.		FEC II	O number	С
ame of Any Connected	Organization, Affiliated Committee, Join	nt Fundraising Re _l	presentativ	ve, or Leadership PAC Spon
Davidson Victory	Fund			
l				
Mailing Address	499 S. Capitol Street SW			
	Suite 407			
	Washington		DC	20003
Relationship:	CITY A		STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Joint Fundraising	g Represent	tative Leadership PAC S
Connecte esignated Agent: Identif	_		g Represent	tative Leadership PAC S
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Connecte esignated Agent: Identif	_		g Represent	
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundrais i			
1.		FEC ID number	С
2.		FEC ID number	C
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ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
CRAMER VICTO	ORY FUND		
Mailing Address	PO BOX 26141		
	ALEXANDRIA	VA	22313
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee X Joint	t Fundraising Representa	Leadership PAC Sp
	fy by name, address (phone number – optional)	Trundraising Represent	Leadership FAC S
esignated Agent: Identi		Tundraising Represent	Leadership FAC S
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esignated Agent: Identification of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which naintains funds. Ington National Bank	STATE A	ZIP CODE A

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h). Joint Fundraisi	ig raiticipant.		
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3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
WESTERN MICH	HIGAN VICTORY FUND		
I			
Mailing Address	228 S. Washington Street		
	Suite 115		
	Alexandria	, , , VA ,	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif		t Fundraising Represent	Leadership PAC S
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h). Joint Fundraisir	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spor
JAKE ELLZEY VI	CTORY FUND		
	PO BOX 30844		
Mailing Address	0 BOX 30044		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		int Foundation Decree	
		int Fundraising Represent	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC S
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NCFL Mailing Address 824 S MILLEDGE AVE STE 101 ATHENS GA 30605 Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Built Name Mailing Address Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number — — — — — — — — — — — — — — — — — — —	5(g) c	or(h). Joint Fundraisin	g Participant:	
ATHENS Relationship: City ▲ Connected Organization Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NCFL Mailing Address 824 S MILLEDGE AVE STE 101 Mailing Address City ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor NCFL Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor NCFL City ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ City ▲ STATE ▲ ZIP CODE ▲ Tolephone Number P. City A STATE A ZIP CODE A Tolephone Number		1.		FEC ID number
A. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NCFL Mailing Address 824 SMILLEDGE AVE STE 101 Affiliated Committee Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number		2.		FEC ID number
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NCFL Mailing Address 824 S MILLEDGE AVE STE 101 ATHENS Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Title OR POSITION ▼ Telephone Number P.O. Box 17001		3		FEC ID number
NCFL Mailing Address 824 S MILLEDGE AVE STE 101 ATHENS Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization		4		FEC ID number
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ATHENS Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number P.O. Box 17001				
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Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Leadership PAC Sponsor Representative Leadership PAC Sponsor Tille OR POSITION CITY ▲ STATE ▲ ZIP CODE ▲ Tille OR POSITION Tille OR POSITION Tille OR Position State Telephone Number Telephone Number P.O. Box 17001				
Connected Organization			ATHENS	GA 30605
8. Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number 9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.		Relationship:	CITY ▲	STATE ▲ ZIP CODE ▲
Full Name Mailing Address Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Telephone Number Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. P.O. Box 17001		Connected	I Organization Affiliated Committee	undraising Representative Leadership PAC Sponsor
Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Broadway Bank Depository, etc.	8.		by name, address (phone number – optional)	
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number 9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. IP.O. Box 17001		Full Name		
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number 9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. P.O. Box 17001		Mailing Address		
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9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. P.O. Box 17001		TITLE OR POSITION	▼ CITY ▲	STATE ▲ ZIP CODE ▲
safety deposit boxes or maintains funds. Name of Bank, Broadway Bank Depository, etc. P.O. Box 17001			Tele	phone Number
Mailing Address P.O. Box 17001	9.	safety deposit boxes or many Name of Bank, Broady	intains funds.	e committee deposits funds, holds accounts, rents
		Mailina Address	P.O. Box 17001	
		g		
San Antonio			San Antonio	TX 178217
CITY ▲ STATE ▲ ZIP CODE ▲				

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safety deposit boxes or ma	ies: List all banks o		Telephone Nun		unds, holds accounts, rents
Banks or Other Depositor safety deposit boxes or ma	ies: List all banks of intains funds. Bridge Bank				unds, holds accounts, rents
Banks or Other Depositor safety deposit boxes or ma	ies: List all banks of intains funds.	or other depositories in w			unds, holds accounts, rents
TITLE OR POSITION	▼		Telephone Nun	nber	
TITLE OR POSITION	▼			_	
		CITY A	ST	ATE A	ZIP CODE ▲
Mailing Address					
Full Name					
Designated Agent: Identify	by name, address	(phone number – optiona	l)		
Connected	Organization	Affiliated Committee	Joint Fundraising F	Representativ	e Leadership PAC Spo
Relationship:		CITY A		STATE A	ZIP CODE ▲
	BATON ROUGE		1	LA I	70896
Mailing Address	PO BOX 64845				
Name of Any Connected GARRET GRAVE	•		undraising Repre	sentative, c	or Leadership PAC Sponso
4.				number C	/
			FEC ID 1		
3.			FEC ID		
2				number C	

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h). Joint Fundraisin	g Participant:		
1		FEC ID number	С
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3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
RUTHERFORD V	ICTORY FUND		
Mailing Address	3030 HARTLEY RD		
. J	STE 120		
	JACKSONVILLE		32257
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected esignated Agent: Identify	Organization Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identify			
esignated Agent: Identify Full Name _ _ _			
esignated Agent: Identify Full Name _ _ _			
esignated Agent: Identify Full Name _ _ _	by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
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Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail ame of Bank, Fifth TI epository, etc.	by name, address (phone number – optional) CITY CITY Te ies: List all banks or other depositories in which intains funds. P.O. Box 630900	STATE A elephone Number the committee deposit	ZIP CODE S funds, holds accounts, ren
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail ame of Bank, Fifth TI epository, etc.	by name, address (phone number – optional) CITY CITY Teles: List all banks or other depositories in which intains funds. hird Bank	STATE A	ZIP CODE A

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5(g) o	or(h). Joint Fundraisin	g Participant:			
	1.		FEC ID	number	C
	2.		FEC ID	number	C
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	4		FEC ID	number	C
6.	Name of Any Connected FEENSTRA VICT	Organization, Affiliated Committee, Joint Fundon	draising Repr	resentative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 183			
		HUDSON		WI	54016
	Relationship:	CITY A		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee Joi	nt Fundraising	Representa	ative Leadership PAC Sponsor
8.		by name, address (phone number - optional)			
	Full Name				
	Mailing Address				
	TITLE OR POSITION	▼ CITY ▲	S	TATE ▲	ZIP CODE ▲
			Telephone Nu	mber	
	safety deposit boxes or ma	ies: List all banks or other depositories in whic intains funds. f Santa Clarita	n the committe	ee deposit	s funds, holds accounts, rents
	Mailing Address	27441 Tourney Road			
	J		1 1 1 1		
		Santa Clarita	, ,	CA	91355
		CITY A	S	TATE A	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
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ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
CALVERT VICTO	DRY FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	ry by name, address (phone number – optional)	Fundraising Hepresenta	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or manual contents.	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which a aintains funds.	STATE A	ZIP CODE A
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which a aintains funds. Of North Georgia	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.			FEC I	D number	C
3.					
			FEC I	D number	С
4.			FEC I	D number	С
			 FEC I	D number	С
lame of Any Connected	Organization, Affiliate	ed Committee, Joint	Fundraising Re	presentativ	re, or Leadership PAC Spon
JOHNSON LEADE	ERSHIP FUND				
1					
Mailing Address	2900 CLEARVIEW F	PKWY			
	SUITE 206				
	METAIRIE		1	LA	70006
		CITY A		STATE A	ZIP CODE 🛦
Relationship:	I Organization Affi		Joint Fundraisir		
Connected		lliated Committee			
Connected		lliated Committee			
Connected esignated Agent: Identify		lliated Committee			
esignated Agent: Identify Full Name		lliated Committee			
Connected esignated Agent: Identify Full Name	by name, address (pl	lliated Committee			tative Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (pl	lliated Committee			
esignated Agent: Identify Full Name	by name, address (pl	hone number – optio		g Represent	tative Leadership PAC S

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page <u>46</u> **of** <u>213</u>

	FEC ID number	С
	FEC ID number	С
<u> </u>	FEC ID number	C
	FEC ID number	C
	ndraising Representativ	e, or Leadership PAC Spons
1818 MILTON AVE		
#1448		
JANESVILLE	wi	53545
CITY ▲	STATE ▲	ZIP CODE ▲
by name, address (phone number - optional)		
by name, address (phone number – optional)		
by name, address (phone number – optional)		
by name, address (phone number – optional)		
by name, address (phone number – optional)		
by name, address (phone number – optional)	STATE A	ZIP CODE A
	#1448 JANESVILLE CITY	FEC ID number FEC ID number FEC ID number Organization, Affiliated Committee, Joint Fundraising Representative FUND 1818 MILTON AVE #1448 JANESVILLE CITY A STATE A

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TAKE BACK THE HOUSE 2022 Mailing Address PO BOX 30844 BETHESDA Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Besignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number	5(g) c	or(h). Joint Fundraisin	g Participant:	
A. STATE A ZIP CODE A Title Or Position ▼ CITY A STATE A ZIP CODE A T		1.		FEC ID number
A. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor TAKE BACK THE HOUSE 2022 Mailing Address		2.		FEC ID number C
A. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor TAKE BACK THE HOUSE 2022 Mailing Address PO BOX 30844 BETHESDA Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization		3.		FEC ID number C
TAKE BACK THE HOUSE 2022 Mailing Address PO BOX 30944 BETHESDA Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundralsing Representative Leadership PAC Sponsor Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number PO BOX 30944 JOINT Fundralsing Representative Leadership PAC Sponsor TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number JOINT STATE A ZIP CODE A Telephone Number Mailing Address Name of Bank, Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, National City Bank Depository, etc.				FEC ID number C
BETHESDA BETHESDA Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Buil Name Mailing Address Mailing Address Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Pack Sponsor Title OR POSITION ▼ Telephone Number Telephone Number Pack State ★ Telephone Number Relationship: STATE ▲ STATE A STATE ▲ STATE A	6.		_	Iraising Representative, or Leadership PAC Sponsor
BETHESDA BETHESDA Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Buil Name Mailing Address Mailing Address Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Pack Sponsor Title OR POSITION ▼ Telephone Number Telephone Number Pack State ★ Telephone Number Relationship: STATE ▲ STATE A STATE ▲ STATE A				
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor 8. Designated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number — — — — — — — — — — — — — — — — — — —		Mailing Address	PO BOX 30844	
Connected Organization			BETHESDA	MD 20824-0844
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, National City Bank Depository, etc. 1900 E Ninth Street Mailing Address		Relationship:	CITY 🛦	STATE ▲ ZIP CODE ▲
Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Telephone Number Name of Bank, National City Bank Depository, etc. Mailing Address 1900 E Ninth Street		Connected	d Organization Affiliated Committee	nt Fundraising Representative Leadership PAC Sponsor
Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number — — — — — — — — — — — — — — — — — — —	8.	Designated Agent: Identify	y by name, address (phone number – optional)	
TITLE OR POSITION CITY STATE ZIP CODE Telephone Number Telephone Number Telephone Number Name of Bank, National City Bank Depository, etc. Mailing Address		Full Name		
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Telephone Number Name of Bank, Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address		Mailing Address		
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Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, National City Bank Depository, etc. Mailing Address 1900 E Ninth Street				
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address Telephone Number In the committee deposits funds, holds accounts, rents after the committee deposits funds, holds accounts, holds accounts after the committee deposits funds, holds accounts after the com		TITLE OR POSITION	▼ CITY ▲	STATE ▲ ZIP CODE ▲
safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address Mailing Address			1	Telephone Number
Cleveland		Name of Bank, Depository, etc.	aintains funds. al City Bank	n the committee deposits funds, holds accounts, rents
			Cleveland	OH
CITY ▲ STATE ▲ ZIP CODE ▲				

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(h). Joint Fundraisir	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
TAKE BACK THE	HOUSE TEXAS 2022		
Mailing Address	PO BOX 30844		
	BETHESDA	, , MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identif		t Fundraising Represent	ative Leadership PAC Spo
Connecte	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Spo
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Connecte Designated Agent: Identif	d Organization Affiliated Committee	t Fundraising Represent	Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee Join y by name, address (phone number – optional)	st Fundraising Representation	Leadership PAC Spo
Connecte Designated Agent: Identif	Affiliated Committee y by name, address (phone number – optional) CITY		
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
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5(g) (or(h). Joint Fundraisin	Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	=	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	ROGER FOR COI	NGRESS VICTORY FUND		
	Mailing Address	10 N. CADDO ST.		
	J	PMB #174		
		CLEBURNE	, TX ,	76031
	Relationship:	CITY ▲	STATE ▲	ZIP CODE A
	Connected	Organization Affiliated Committee X Joint F	undraising Representa	ative Leadership PAC Sponsor
3.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ies: List all banks or other depositories in which th ntains funds.	e committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	f America		
	Mailing Address	31531 Santa Margarita Parkway		
	J			
		Rancho Santa Marga	CA	92688

FEC Form 1S (Revised 02/2017)

Page $\underline{^{50}}$ of $\underline{^{213}}$

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
Chris Stewart Fre	edom Fund		
	l 610 S. BOULEVARD		
Mailing Address	OTO 3. BOOLEVARD		
	TAMPA 	FL	33606
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
B. Designated Agent: Identif	fy by name, address (phone number – optional)		
	, ,		
Full Name			
Full Name			
Mailing Address	CITY A	STATE A	ZIP CODE A
	CITY A	STATE A	
Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m	CITY A Te pries: List all banks or other depositories in which the	lephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi n	ig Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
Protect the House) 		
Mailing Address	P.O. Box 30844		
Ç			
	Bethesda	, MD ,	20824
Relationship:		STATE A	ZIP CODE A
		SIAIF	ZIP CODE
Connected	CITY ▲ d Organization	Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee		Leadership PAC Sp
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Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	Fundraising Representation	
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esignated Agent: Identify Full Name Mailing Address	Affiliated Committee y by name, address (phone number – optional) CITY	Fundraising Representation	
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\underline{^{52}}$ of $\underline{^{213}}$

1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected TEAM DUNCAN	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Mailing Address	228 S. WASHINGTON STREET		
Ç	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC S
	Affiliated Committee X Joint by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC S
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Full Name	r by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which intains funds. Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisin	g i di dolpanti		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Mailing Address	1005 CONGRESS AVE STE 400		
maining / taareee			
	AUSTIN	, TX	78701
Relationship:	CITY A		
neialionsnip.	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundra /ICTORY COMMITTEE	aising Representative	e, or Leadership PAC Spon
Mailing Address	824 S. MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC S
	Affiliated Committee Joint Joint by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representation	Leadership PAC S
esignated Agent: Identify		Fundraising Representation	Leadership PAC S
esignated Agent: Identify		Fundraising Representation	Leadership PAC S
esignated Agent: Identify	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
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Full Name	r by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which sintains funds. rgan Chase Bank, NA	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraising	Participant:		
1.		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected (Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spor
TAKE BACK THE	HOUSE CALIFORNIA 2022		
Mailing Address	P.O. BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or mai	CITY CITY Ties: List all banks or other depositories in which	STATE ▲	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION Tanks or Other Depositoring the deposit boxes or main the depository, etc.	CITY CITY ies: List all banks or other depositories in which ntains funds. falley Bank	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundral	ising Representative	, or Leadership PAC Sponsor
	ADRIAN SMITH V	TCTORY FUND		
	Mailing Address	228 S. WASHINGTON STREET		
	Ü	SUITE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
	Connected			
	Connected			
3.		by name, address (phone number - optional)		
3.				
3.	Designated Agent: Identify			
3.	Designated Agent: Identify Full Name			
3.	Designated Agent: Identify Full Name			
3.	Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)		ZIP CODE A
3.	Designated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
3.	Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY	STATE A	
	Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional) CITY Tele ries: List all banks or other depositories in which the	STATE A	ZIP CODE A
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	Pull Name	by name, address (phone number – optional) CITY CITY Tele ries: List all banks or other depositories in which the intains funds. hird Bank	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e or Leadershin PAC Snon
	DRY COMMITTEE	and in grade in a second in a	-, <u></u>
Mailing Address	P.O. BOX 26141		
. J			
	ALEXANDRIA	, VA	22313
Dalatianahin			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	fy by name, address (phone number – optional)	Tanaraioning Tropicoonia	Zaro Zadasomp (Ac of
esignated Agent: Identi			
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5(g) c	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	BUCSHON VICTO	ORY COMMITTEE		
	Mailing Address	228 S. WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
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	J		1 1 . 1	
	Ü	CITY		
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
		•		
		•	STATE A	
9.	TITLE OR POSITION	ries: List all banks or other depositories in which	STATE A	ZIP CODE ▲
	TITLE OR POSITION	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE ▲
	Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE ▲
	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE ▲
	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE ▲

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or(h). Joint Fundraisin	g Participant:		
1.	<u> </u>	FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	P.O. BOX 26141		
	ALEXANDRIA	VA	22313
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	I Organization Affiliated Committee	undraising Representa	tive Leadership PAC Spons
Full Name	by name, address (phone number – optional)		
Mailing Address			
Mailing Address	CITY A	STATE A	ZIP CODE A
	•		ZIP CODE A
Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main	ries: List all banks or other depositories in which the intains funds. tate Bank	STATE A	
Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mathematical mathematical safety deposit boxes or mathematical safety depo	ries: List all banks or other depositories in which the intains funds.	STATE A	
Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds. tate Bank	STATE A	
Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds. tate Bank	STATE A	

FEC Form 1S (Revised 02/2017)

rganization, Affiliated Committee, Joint ORY COMMITTEE	FEC ID number	C
rganization, Affiliated Committee, Joint ORY COMMITTEE	FEC ID number	C
rganization, Affiliated Committee, Joint ORY COMMITTEE	FEC ID number	C
rganization, Affiliated Committee, Joint ORY COMMITTEE		
ORY COMMITTEE 228 S. WASHINGTON STREET	Fundraising Representat	ive, or Leadership PAC Spon
ORY COMMITTEE 228 S. WASHINGTON STREET	Fundraising Representat	ive, or Leadership PAC Spon
228 S. WASHINGTON STREET		
CUITE 44E		
SUITE 115		
ALEXANDRIA	, , , , , , , VA	22314
CITY A	STATE /	▲ ZIP CODE ▲
		ntative Leadership PAC Sp
CITY A	STATE ▲	ZIP CODE ▲
1		[_] [_]
	reiepnone Number L	
	CITY A Organization Affiliated Committee by name, address (phone number – option	CITY A STATE A Organization Affiliated Committee

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 61 of 213

(h). Joint Fundraisi	ng rantopanti		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
GREG PENCE V	ICTORY		
Mailing Address	P.O. BOX 275		
-			
	TAYLORSVILLE	ı ıNı	47280
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee X fy by name, address (phone number – optional	oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi			ative Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional		
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Designated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional		
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional	STATE A	
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional CITY CITY CITY pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposition afety deposit boxes or maintenance.	fy by name, address (phone number – optional CITY CITY pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposition afety deposit boxes or maintenance.	fy by name, address (phone number – optional CITY CITY CITY pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
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Page 62 of 213

h). Joint Fundraisi i	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
TEAM CURTIS J	OINT FUNDRAISING COMMITTEE		
	070 5407 001/71 75401 5		
Mailing Address	370 EAST SOUTH TEMPLE		
	SUITE 580		
	SALT LAKE CITY	UT	84111
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Represente	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	
esignated Agent: Identif Full Name Mailing Address	by by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name Mailing Address	by by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or m	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, Huntir	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds. Ington Bank	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds. Ington Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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3.			FEC	D number	С
4.			 FEC	D number	С
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	_	ffiliated Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Spons
KIM VICTORY FU	JND		1 1 1 1		
			1 1 1 1 1		
	ı 9460 TEGNEF	P POAD			
Mailing Address	J J J J	KROAD			
			1	CA	95324
	HILMAR				
Relationship:	HILMAR I I I I I I I I I	CITY Affiliated Committee	Joint Fundraisin	STATE A	
Connected	d Organization				
Connecter connec	d Organization	Affiliated Committee			
Connected Pesignated Agent: Identify Full Name	d Organization	Affiliated Committee			
esignated Agent: Identif	d Organization y by name, addre	Affiliated Committee			Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	d Organization y by name, addre	Affiliated Committee		ng Represent	Leadership PAC Sp
Connected Pesignated Agent: Identify Full Name	d Organization y by name, addre	Affiliated Committee		ng Represent	Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

5(g) or (h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
Mailing Address	2870 DOBIE ROAD		
	MASON	MI L	48854
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
8. Designated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name _ _ _ Mailing Address	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or mail	CITY ▲ Tel ories: List all banks or other depositories in which t	STATE ▲	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the property of the position of the positi	CITY ▲ CITY ▲ Tel ories: List all banks or other depositories in which the naintains funds.	STATE ▲	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or m Name of Bank, Capita	CITY ▲ CITY ▲ Tel ories: List all banks or other depositories in which the interior funds. all Bank	STATE ▲	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the property of the position of the positi	CITY ▲ CITY ▲ Tel ories: List all banks or other depositories in which the interior funds. all Bank	STATE ▲	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin		FEC ID number	С
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2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
STAUBER VICTO	ORY FUND		
Mailing Address	332 W. LEE HIGHWAY		
	#303		
	WARRENTON	VA VA	20186
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC S
	Affiliated Committee Joint Joint by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full NameMailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mailing ame of Bank, Classic	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full NameMailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mailing ame of Bank, Classic	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name	colty Bank	STATE A	ZIP CODE A
Full Name	colty Bank	STATE A	ZIP CODE A

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Page $\underline{^{66}}$ of $\underline{^{213}}$

Prganization, Affiliated Committee, Joi FUND 228 S. WASHINGTON STREET SUITE 115 ALEXANDRIA CITY Organization Affiliated Committee	FE FE	VA	C C C ve, or Leadership PAC Spor
FUND 228 S. WASHINGTON STREET SUITE 115 ALEXANDRIA CITY	FE	EC ID number EC ID number g Representativ	C C Ve, or Leadership PAC Spor
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FUND 228 S. WASHINGTON STREET SUITE 115 ALEXANDRIA CITY	nt Fundraising	VA	
228 S. WASHINGTON STREET SUITE 115 ALEXANDRIA CITY			22314
SUITE 115 ALEXANDRIA CITY			22314
SUITE 115 ALEXANDRIA CITY			22314
ALEXANDRIA CITY			22314
CITY A			22314
Organization Affiliated Committee		STATE A	ZIP CODE ▲
by name, address (phone number – op	tional)		
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		1 1 1	1 , , , , 1-1 ,
CITY A		STATE ▲	ZIP CODE ▲
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	Telepho	one Number _	
•	CITY A	•	CITY A STATE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
WATKINS VICTO	DRY COMMITTEE		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	y by name, address (phone number – optional)		
Pesignated Agent: Identi	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or meaning the second s	CITY CITY Telepries: List all banks or other depositories in which aintains funds. Citizens Bank 4400 Six Forks Road	the committee deposit	ZIP CODE S funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the property of the position of Bank, Depository, etc.	CITY CITY Te pries: List all banks or other depositories in which aintains funds. Citizens Bank	elephone Number	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	DAN CRENSHAW	VICTORY COMMITTEE		
	Mailing Address	824 S MILLEDGE AVE STE 101		
		ATHENS	GA GA	30605
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sponsor
3.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	Mailing Address	1		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	ephone Number	
).	safety deposit boxes or ma	ies: List all banks or other depositories in which the intains funds. erce Bank	ne committee deposits	s funds, holds accounts, rents
		_I 1000 Walnut		
	Mailing Address	1000 Walliot		
	Mailing Address			
	Mailing Address	Kansas City	MO	64106

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisin	g Farticipant.		
1.		FEC ID number	С
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lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
DUNN VICTORY	FUND		
Mailing Address	12176 CHANCERY STATION CIR		
	RESTON	, , , VA	20190
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization	t Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Spo
		t Fundraising Representa	Leadership PAC Spo
esignated Agent: Identify		t Fundraising Representa	ative Leadership PAC Spo
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esignated Agent: Identify	y by name, address (phone number – optional)	t Fundraising Representa	
Full NameMailing Address	y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Spo
esignated Agent: Identify	y by name, address (phone number – optional) CITY	STATE A	
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t: Identify SS DSITION Deposito es or ma Truist	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisin	α Particinant·		
1		FEC ID number	C
2.		FEC ID number	C
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4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	120 N CONGRES ST STE 300		
	JACKSON	MS	39201
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	undraising Representa	tive Leadership PAC Sponso
Designated Agents Identifi	, by name, address (phone number, entional)		
Full Name	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors safety deposit boxes or mail	CITY CITY Tele ries: List all banks or other depositories in which the intains funds. First Bank 300 Galleria Parkway SE	STATE ▲ phone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY Tele ries: List all banks or other depositories in which the sintains funds. First Bank 300 Galleria Parkway SE Suite 100	STATE A phone Number e committee deposits	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Tele ries: List all banks or other depositories in which the intains funds. First Bank 300 Galleria Parkway SE	STATE ▲ phone Number	

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Page $\frac{71}{}$ of $\frac{213}{}$

	Chevy Chase	MD	20815
Mailing Address	4445 Willard Avenue Suite 100		
ame of Bank, Forbri	ght Bank		
anks or Other Deposito	ories: List all banks or other depositories in which aintains funds.	the committee deposit	s funds, holds accounts, rent
		elephone Number	
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
Mailing Address			
Full Name			
	Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	WASHINGTON	DC	20003
Mailing Address	#407		
Mailing Address	499 SOUTH CAPITOL STREET SW		
GREG STEUBE	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
4.		5 15 114111501	
3.		FEC ID number	C
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FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi r		1	FEC ID number	er C	T
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4			FEC ID number	er C	_
		nmittee, Joint Fund	raising Representa	ative, or Leadership PAC Sp	on
LATTA VICTORY	FUND				
Mailing Address	9856 ARCHER LANE				
	DUBLIN		OH	43017	
Relationship:	CI	TY 🛦	STATE	ZIP CODE A	
Connecte	d Organization Affiliated	Committee X Joint	Fundraising Repres	sentative Leadership PAC	
	d Organization Affiliated of the property of the Affiliated of the		t Fundraising Repres	sentative Leadership PAC	
	_		t Fundraising Repres	Sentative Leadership PAC	
esignated Agent: Identif	_		t Fundraising Repres	Leadership PAC	
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esignated Agent: Identif	by name, address (phone r	number – optional)			S
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FEC Form 1S (Revised 02/2017)

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4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
GONZALEZ VICT	ORY FUND		
Mailing Address	9856 ARCHER LANE		
	DUBLIN	OH	43017
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee Joint Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin	9 . m		
1.		FEC ID number	C
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3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected BUCKEYE VICTO	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
BOOKE TE VIOTO			
Mailing Address	499 SOUTH CAPITOL STREET SW		
mailing / taarooc	407		
	WASHINGTON	, DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE A
riciationship.	CITT A	SIAIE	ZIF CODE
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identify Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depository, etc and	ries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for

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h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
=	l Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
NDSTRONG			
	1515 BURNT BOAT DR NUM 112		
Mailing Address	1313 BONN BON BINNOW 112		
	BISMARCK	ND ND	58503
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Join	t Fundraising Represent	Leadership PAC Sp
	Affiliated Committee	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
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1.													
						FEC ID	number	С					
2.						FEC ID	number	С					
3.					_	FEC ID	number	С					
4.						FEC ID	number	С					
Name of Any Co			ated Commi	ttee, Joint	Fundrai	sing Rep	resentati	ve, or	Leade	rship	PAC S	pons	or
JOHN ROS	SE VICTO	DRY FUND											
Mailing Add	dress	PO BOX 2404			1 1 1	1 1 1	1 1 1	1 1	1 1	1 1	1 1	1 1	ı
· ·													
	L I	COOKEVILLE					, TN ,		38502		1 1		
Relationship	p:		CITY 4				STATE A	L		7IP (_ -L	<u> </u>	
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	Connected O		Affiliated Com			undraising	Represen	ntative		eaders.	ship PA	C Spo	onso
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Designated Ager	nt: Identify by	y name, address	(phone numb	per – optio	nal)		Represen	ntative					
Designated Ager Full Name Mailing Addre	nt: Identify by		(phone numb	per – optio	nal)			ntative					
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FEC Form 1S (Revised 02/2017)

anks or Other Deposito		anks or other depositories	in which the comm	ittee deposi	ts funds, holds accounts, ren
			Telephone N	lumber _	
TITLE OR POSITION	▼	CITY A		STATE ▲	ZIP CODE ▲
Mailing Address					
Full Name					
		dress (phone number – opi		y nepresent	Leaueisiiip PAC S
	d Organization	Affiliated Committee	X Joint Fundraisir		
Relationship:	ATTENS	CITY A		STATE A	
	ATHENS			ı GA ı	30605
Mailing Address	824 S MILLI	EDGE AVE STE 101			
	004.0.5	EDOE AVE OTE 101			
<u> </u>					
ame of Any Connected HRW VICTORY F		Affiliated Committee, Joi	nt Fundraising Re	presentativ	e, or Leadership PAC Spon
4.					
3.				D number	C
2.				D number	C
1				D number D number	C

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
TEAM TIMMONS	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee X Join y by name, address (phone number – optional)		
esignated Agent: Identif	d Organization Affiliated Committee Join y by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	d Organization Affiliated Committee Join y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y by name, address (phone number – optional) CITY CITY Tries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mailing ame of Bank, epository, etc.	Affiliated Committee y by name, address (phone number – optional) CITY CITY Tries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8

(h). Joint Fundrais	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Matter Address	PO BOX 21097		
Mailing Address			
	HOT SPRINGS	ΛP.	71903
		AR	
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Solution Join Affiliated Committee Solution Affiliated Committee Solution Affiliated Committee Solution Solution In the Indiana Affiliated Committee Solution In the	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Ident		t Fundraising Represent	ative Leadership PAC Spo
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esignated Agent: Ident		t Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Ident	ify by name, address (phone number – optional)	st Fundraising Represent	
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Full Name Mailing Address	ify by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
TEAM HUDSON			
Mailing Address	824 S MILLEDGE AVE, STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
Connected	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or materials and the companion of Bank,	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraising	Participant:	
	1		FEC ID number C
	2.		FEC ID number C
	3.		FEC ID number
	4		FEC ID number
6.	Name of Any Connected C	_	ising Representative, or Leadership PAC Sponsor
	Mailing Address	499 SOUTH CAPITOL STREET SW	
		#405	
		WASHINGTON	DC 20003 - -
	Relationship:	CITY A	STATE ▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	Fundraising Representative Leadership PAC Sponsor
8.		by name, address (phone number – optional)	
	Full Name		
	Mailing Address		
	TITLE OR POSITION 1	▼ CITY ▲	STATE ▲ ZIP CODE ▲
		Tele	ephone Number
9.	Banks or Other Depositoric safety deposit boxes or main Name of Bank,		ne committee deposits funds, holds accounts, rents
	Depository, etc.		
	Mailing Address		
ı		CITY ▲	STATE ▲ ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
		_	
ame of Any Connected	Organization, Affiliated Committee, Joint Fo	ındraising Representativ	e, or Leadership PAC Spon
VAN TAYLOR VI	CTORY FUND		
Mailing Address	1900 PRESTON ROAD		
	#267 - PMB 229		
	PLANO		75093
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
•			
	Affiliated Committee x	Joint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	fy by name, address (phone number – optiona CITY CITY CITY Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
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esignated Agent: Identification Full Name	fy by name, address (phone number – optiona CITY CITY City Dries: List all banks or other depositories in whom the state of the	STATE A Telephone Number	ZIP CODE A
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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
-	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
DAN BISHOP VI	CTORY COMMITTEE		
	40000 CDACCV CDEFK DI		
Mailing Address	10809 GRASSY CREEK PL		
	RALEIGH	NC NC	27614
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
	fy by name, address (phone number – optional)	rundraising nepresent	Leadership PAC Sp
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esignated Agent: Identi		t rundraising Represent	Leadersnip PAC Sp
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1.			FEC ID	number	C
2.			FEC ID) number	С
3.			FEC ID	number	С
4.			FEC ID) number	C
			_		
ame of Any Connected	Organization, Affilia	ted Committee, Joint F	undraising Rep	resentativ	e, or Leadership PAC Spons
TEAM HUIZENG	4				
Mailing Address	PO BOX 2485				
				VA	22152
	SPRINGFIELD				
	d Organization A		Joint Fundraising	STATE A	ZIP CODE ▲ ative Leadership PAC Sp
Connected	d Organization A	Affiliated Committee X			
Connecter connec	d Organization A	Affiliated Committee X			
esignated Agent: Identif	d Organization A	Affiliated Committee X			
esignated Agent: Identif	d Organization A	(phone number – optional			ative Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	d Organization A	Affiliated Committee (phone number – optional)	il)	g Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization A	(phone number – optional	il)	Represent	ative Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

h). Joint Fundraising	Participant:				
1.			FE	C ID number	C
2.			FE	C ID number	C
3.			FE	C ID number	С
4.			FE	C ID number	С
ame of Any Connected (Organization, Affiliated	Committee, Joint	Fundraising	Representativ	e, or Leadership PAC Spor
LAWOT					
<u> </u>					
Mailing Address	PO BOX 30844				
	BETHESDA			MD	20824
Relationship:		CITY A		STATE ▲	ZIP CODE ▲
				aising Represent	tative Leadership PAC S
esignated Agent: Identify Full Name				aising Represent	tative Leadership PAC S
esignated Agent: Identify				aising Represent	Leadership PAC S
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Full Name Mailing Address TITLE OR POSITION anks or Other Depositor aftety deposit boxes or mail ame of Bank, epository, etc.	by name, address (pho	one number – option	nal)	STATE A	ZIP CODE A
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	g Participant:			
1.			FEC ID number	C
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
	Organization, Affiliated Committe	e, Joint Fundrais	sing Representative	e, or Leadership PAC Spor
CAWTHORN TRI	UMPH COMMITTEE			
	3103 JULIAN GLEN CIR			
Mailing Address				
	WAXHAW		NC NC	28173
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Affiliated Commit		undraising Representa	ative Leadership PAC S
esignated Agent: Identif	Affiliated Commit by name, address (phone number		undraising Representa	Leadership PAC S
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esignated Agent: Identif	_		undraising Representa	Leadership PAC S
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esignated Agent: Identif	by name, address (phone number	- optional)		
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number	- optional)		
Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other deposit	Telep	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or ma	ries: List all banks or other deposit	Telep	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or ma	ries: List all banks or other deposit	Telep	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor detay deposit boxes or material depository, etc	ries: List all banks or other deposit	Telep	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor detection between the second s	ries: List all banks or other deposit	Telep	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	•		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	I Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 183		
	HUDSON	WI	54016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connecte		Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identification	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identification	ed Organization Affiliated Committee	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee Affiliated Committee Figure 1. Joint 1. Joint 2. Joi	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identification	Affiliated Committee Affiliated Committee Figure 1. Joint Market Street Stree		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Affiliated Committee Ty Joint Ty by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee Affiliated Committee Ty Joint Ty by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	С
3		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
AMERICAN DRE	AM VICTORY FUND		
	9070 IRVINE CENTER DRIVE		
Mailing Address			
	SUITE 150		
	IRVINE	CA	92618
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
Connecte	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identification Full Name Mailing Address	by by name, address (phone number – optional)		
esignated Agent: Identif	by by name, address (phone number – optional) CITY	STATE A	
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Connected dentition of the content o	cy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
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(h). Joint Fundraisi	•		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
GIMENEZ VICTO	DRY COMMITTEE		
	824 S MILLEDGE AVE STE 101		
Mailing Address			
	.=		20005
	ATHENS	GA L	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee	Fundraising Represent	Leadership PAC Sp
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Trundraising Representation of the state of	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

5(g) oı	r(h). Joint Fundraisin	ng Participant:		
	1.	F	FEC ID number	C
	2.	 	FEC ID number	C
	3.		FEC ID number	С
_	4.		FEC ID number	С
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraisin	ng Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD MD	20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	draising Representa	ative Leadership PAC Sponsor
-				
- 3. I	Designated Agent: Identify	y by name, address (phone number – optional)		
- 3. I		y by name, address (phone number – optional)		
- 3. I	Full Name	y by name, address (phone number – optional)		
- 3. I	Full Name	y by name, address (phone number – optional)		
- 3. I	Full Name	CITY	STATE A	ZIP CODE A
- 3. I	Full Name	CITY A		
-). !	Full Name Mailing Address TITLE OR POSITION	CITY CITY Teleph Dries: List all banks or other depositories in which the other depositories is a specific depositories in the other depositories in the ot	STATE ▲	ZIP CODE 🛦
-). !	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor boxes or main and the safety deposit boxes or main and the safety depository, etc.	CITY CITY Teleph Dries: List all banks or other depositories in which the other depositories is a specific depositories in the other depositories in the ot	STATE ▲	ZIP CODE 🛦
-). !	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or main manner.	CITY CITY Teleph Dries: List all banks or other depositories in which the other depositories is a specific depositories in the other depositories in the ot	STATE ▲	ZIP CODE 🛦
-). !	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor boxes or main and the safety deposit boxes or main and the safety depository, etc.	CITY CITY Teleph Dries: List all banks or other depositories in which the other depositories is a specific depositories in the other depositories in the ot	STATE ▲	ZIP CODE 🛦
-). !	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor boxes or main and the safety deposit boxes or main and the safety depository, etc.	CITY CITY Teleph Dries: List all banks or other depositories in which the other depositories is a specific depositories in the other depositories in the ot	STATE ▲	ZIP CODE 🛦

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	1				
Name of Bank, Depository, etc.					
Banks or Other Depositor safety deposit boxes or ma	ries: List all banl intains funds.	ks or other depositories in	which the committ	ee deposit	is funds, holds accounts, rents
			Telephone Nu	ımber L	
TITLE OR POSITION	▼	CITY A		STATE A	ZIP CODE ▲
		OLTA:			710 0057
Mailing Address					
Full Name					
Designated Agent: Identify				nepresent	Leadership FAC Spor
Relationship:	I Organization	CITY ▲ Affiliated Committee	✗ Joint Fundraising	STATE A	ZIP CODE ▲ ative Leadership PAC Spon
Deleties	ATHENS	OIT		GA	30605
	SUITE 101				
Mailing Address	824 S MILLED	OGE AVE			
RESCHENTHALE					
A. L.	Overanization A	#iliated Committee Inin			e, or Leadership PAC Sponso
3				number	C
2.				number	C
				number	C

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	Iraising Representativ	e, or Leadership PAC Spor
BYRON DONALI	DS VICTORY FUND		
Mailing Address	2430 VANDERBILT BEACH ROAD		
Mailing Address	STE 108 PMB 260		
	NAPLES		34108
Bulationski			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Join Join ify by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC S
		nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi	ify by name, address (phone number – optional)	state A	
esignated Agent: Identi Full Name Mailing Address	ify by name, address (phone number – optional)		
esignated Agent: Identic	ify by name, address (phone number – optional) CITY T	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank,	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc. Mailing Address					
afety deposit boxes or made ame of Bank, epository, etc.					
afety deposit boxes or ma					
		s or other depositories in	which the comm	ittee deposi	ts funds, holds accounts, ren
IIILE OR POSITION	▼	, , , , , , , , 1	Telephone N	Number	- -
TITLE OR POSITION		CITY A		STATE ▲	ZIP CODE ▲
Mailing Address					
Full Name					
esignated Agent: Identify	y by name, addres	ss (phone number – optio	nal)		
Connected	d Organization	Affiliated Committee	Joint Fundraisin	g Represent	tative Leadership PAC S
Relationship:		CITY A		STATE A	ZIP CODE A
	BRENTWOOD			TN	37024
maining / tudiooo					
Mailing Address	PO BOX 2706				
<u> </u>					
GREEN VICTOR		iliated Committee, Joint	rundraising Ke	presentativ	e, or Leadership PAC Spor
	Ouroni-sties A"	illiated Committee 122	Fundada - P		o ou l'andershie DAG G
4.			FEC I	D number	C
3.			FEC I	D number	С
			FEC I	D number	С
1			FEC I	D number	C

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
LESKO VICTORY			
<u> </u>			
	228 S WASHINGTON STREET		
Mailing Address	SUITE 115		
	ALEXANDRIA	, VA ,	22314
Relationship:			
neiationship.	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
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esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY Terries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositorafety deposit boxes or mail	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mailing ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mailing ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page $\underline{^{95}}$ of $\underline{^{213}}$

5(g) o	r(h). Joint Fundraisin	g Participant:	
	1.		FEC ID number
	2		FEC ID number
	3.		FEC ID number
	4		FEC ID number
6.	Name of Any Connected TIFFANY VICTOR		sing Representative, or Leadership PAC Sponsor
		PO BOX 30844	
	Mailing Address	FO BOX 30044	
		BETHESDA	MD 20824
	Relationship:	CITY A	STATE ▲ ZIP CODE ▲
	Connected	Affiliated Committee X Joint Fu	undraising Representative Leadership PAC Sponsor
8.			
0.		by name, address (phone number – optional)	
0.	Full Name	by name, address (phone number – optional)	
0.		by name, address (phone number – optional)	
0.	Full Name	by name, address (phone number – optional)	
0.	Full Name	by name, address (phone number — optional)	
0.	Full Name	CITY	STATE A ZIP CODE A
0.	Full Name	CITY A	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	CITY CITY Teleparties: List all banks or other depositories in which the	STATE A ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY CITY Teleparties: List all banks or other depositories in which the	STATE A ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	CITY CITY Teleparties: List all banks or other depositories in which the	STATE A ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Teleparties: List all banks or other depositories in which the	STATE A ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Teleparties: List all banks or other depositories in which the	STATE A ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\underline{^{96}}$ of $\underline{^{213}}$

h). Joint Fundraisi r	.9		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representativ	e, or Leadership PAC Spon
HERN VICTORY	FUND		
I			
Mailing Address	8630 S PEORIA AVE		
	TULSA	OK	74132
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC S
Connected	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
Connected		t Fundraising Represent	ative Leadership PAC Sp
Connecter connec		t Fundraising Represent	ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name		t Fundraising Represent	ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name	y by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Spanish
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esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposition of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\underline{^{97}}$ of $\underline{^{213}}$

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
MCMORRIS ROI	DGERS WIN THE FUTURE FUND		
Mailing Address	PO BOX 2485		
	SPRINGFIELD	, , , VA ,	22152
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Spo
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Spo
esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Spo
esignated Agent: Identification	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Spo
esignated Agent: Identification	Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee y Joint y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee y Joint y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisii	ig Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
JEANNE VICTOR	RY FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE A	ZIP CODE ▲
	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Spo
	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee	nt Fundraising Represent	Leadership PAC Spo
Designated Agent: Identif	d Organization Affiliated Committee		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Agents or Other Depositor	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification of the Position of the Positi	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Agents or Other Depositor	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Cafety deposit boxes or make the cafety deposit boxes or mak	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
OBERWEIS VIC	TORY COMMITTEE		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Joint Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the control of the	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Representativ	e, or Leadership PAC Spons
COLLINS FOR T	EXAS VICTORY FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	, , MD	20824
Relationship:	CITY 🛦	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Joint J	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
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5(g) or ((h). Joint Fundraisin g	g Participant:		
	1.	Ff	EC ID number	C
	2.	FF	EC ID number	C
	3.	Ff	EC ID number	C
_	4	FE	EC ID number	C
6. N	Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising	g Representative	, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD MD	20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Iraising Representa	tive Leadership PAC Sponsor
3. D	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	Mailing Address			
			1 1 1	
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telepho	one Number	
s: N	safety deposit boxes or mai	ries: List all banks or other depositories in which the co		s funds, holds accounts, rents
s: N	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the co		s funds, holds accounts, rents
s: N	safety deposit boxes or mai	ries: List all banks or other depositories in which the co		s funds, holds accounts, rents
s: N	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the co		s funds, holds accounts, rents
s: N	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the co		s funds, holds accounts, rents ZIP CODE

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
STEEL VICTOR	Y FUND		
Mailing Address	9070 IRVINE CENTER DRIVE #150		
	IRVINE	CA CA	92618
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
Connecte		t Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address	ed Organization Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Representation	
esignated Agent: Identi	Affiliated Committee Affiliated Committee Fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee Affiliated Committee Fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite	Affiliated Committee Affiliated Committee Typical Join Affiliated Committee Typical C	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Affiliated Committee Typical Join Affiliated Committee Typical C	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite	Affiliated Committee Affiliated Committee Typical Join Affiliated Committee Typical C	STATE A	ZIP CODE A
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee Affiliated Committee Typical Join Affiliated Committee Typical C	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee Affiliated Committee Typical Join Affiliated Committee Typical C	STATE A	ZIP CODE A

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1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
SMUCKER VICT	ORY COMMITTEE		
	204 C MILLEDGE AVE STE 404		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA L	30605
		STATE ▲	ZIP CODE ▲
Relationship:	CITY A ed Organization Affiliated Committee	nt Fundraising Represent	
Connecte			
esignated Agent: Identi	ed Organization Affiliated Committee		
Connecte esignated Agent: Identif	ed Organization Affiliated Committee		
esignated Agent: Identi	ed Organization Affiliated Committee		
esignated Agent: Identi	Affiliated Committee Affiliated Committee y Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
Connected Agent: Identification Full Name	Affiliated Committee Join fy by name, address (phone number – optional)		ative Leadership PAC Sp

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
	l Organization, Affiliated Committee, Joint Fundr	raising Representativ	e, or Leadership PAC Spons
TEAM JOYCE FO	OR PENNSYLVANIA		
Mailing Address	824 S MILLEDGE AVE		
. 3	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE A	ZIP CODE ▲
		Fundraising Represent	ative Leadersnip PAC Spo
	fy by name, address (phone number – optional)	Fundraising Hepresent	Leadersnip PAC Spo
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identi		Fundraising Represent	Leadersnip PAC Spo
Pesignated Agent: Identi		Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Pesignated Agent: Idention Full Name	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Pesignated Agent: Idention Full Name	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Idention Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or make the content of Bank,	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or make the property of the propert	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Canks or Other Deposite afety deposit boxes or make the property of the propert	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundraisi	ng Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
BIG DAN RODIM	IER VICTORY COMMITTEE		
Mailing Address	50 S JONES BLVD STE 201		
	LAS VEGAS	, , , NV ,	89107
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY To	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1		Participant:																			
									ı	FEC	ID	numl	oer	С	C.			Ξ			
2. 🔟									ı	FEC	ID	numl	oer	С				Ξ	Ξ	Ξ	
3. 🔟									ı	FEC	ID	numl	oer	С				Ξ		Ξ	Ξ
4. 🖳									ı	FEC	ID	numl	oer	С				_	_	Ξ	
	Any Connected (SE VICTORY		Affiliate	d Con	nmitt	ee, J	oint	Fund	raisi	ng R	Repre	esen	tative	e, or	Lea	ders	ship	PA	C S	pon	sor
	JL VICTORT																				ш
Moil	ing Address	2318 CURTI	S STRE	ΕT																	
iviali	ing Address																				
		DENVER										C	<u> </u>		802	205					
		DENVER																_]-			
Rela	ationship:			CIT	Υ 🛦						;	STAT	E 🔺				ZIP	СО	DE	A	
Eull N																					
	ame	1		<u> </u>						<u> </u>						<u> </u>				<u> </u>	
	ame																				
Mailing				CITY							S	TATE				Z	IP C		- E •		

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
NANCY MACE V	I Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Affiliated Committee Figure 1 Figure 2 Figure 2 Figure 3 Figure 3 Figure 3 Figure 4 Figure 3 Figure 4 Figure 4	: Fundraising Representa	ative Leadership PAC Sp
		EFundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	Leadership PAC Sp
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6

Page $\frac{108}{}$ of $\frac{213}{}$

Mailing Address					
ame of Bank, epository, etc.					
anks or Other Depositor afety deposit boxes or mai		nks or other depositories in	which the commi	ttee deposit	s funds, holds accounts, rent
			Telephone N	umber	
TITLE OR POSITION	▼	CITY A		STATE A	ZIP CODE ▲
Mailing Address					
Full Name					
		ess (phone number – opti		a uebieseili	Leadership FAC Sp
	Organization	Affiliated Committee	X Joint Fundraising		
Relationship:		CITY A		STATE A	ZIP CODE A
	ATHENS			, GA ,	30605
Mailing Address					
	ı 824 S MILLE	DGE AVE STE 101			
VICTORIA VICTO		Affiliated Committee, Join	t Fundraising Re	oresentative	e, or Leadership PAC Spons
4.					
3.				number	C
) number	C
- 1			 FEC_II) number	С
2.	<u> </u>		FEC II) number	C

FEC Form 1S (Revised 02/2017)

Page ____ **of** ______

TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc. Mailing Address	▼	CITY A	Telephone Numb]-[
anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	▼		Telephone Numb	er]-[
anks or Other Deposito afety deposit boxes or ma	▼		Telephone Numb	er]-[
anks or Other Deposito	▼		Telephone Numb	er]-[
TITLE OR POSITION		CITY A			-
TITLE OR POSITION		CITY A			- -
TITLE OR POSITION		CITY A	SIAI	E▲	
		CITY	TAT9		ZIP CODE ▲
	1				
Mailing Address					
Full Name					
esignated Agent: Identify	y by name, addres	s (phone number – optional)		
Connected	d Organization	Affiliated Committee	oint Fundraising Re	presentative	Leadership PAC Sp
Relationship:		CITY A	ST	ATE A	ZIP CODE ▲
	LAKELAND			FL L	33806
Mailing Address	P.O. BOX 2811				
lame of Any Connected FRANKLIN VICTO		iliated Committee, Joint Fu	ndraising Represe	entative, or L	eadership PAC Spons
7.			J		
4.			」 FEC ID nu	=	
3.			」 FEC ID nu		
3.			」 FEC ID nu	mber C	
1			FEC ID nu	mber C	

FEC Form 1S (Revised 02/2017)

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(h). Joint Fundraisir	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected UNITED TO WIN	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 9891		
	ARLINGTON	VA	22219
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
esignated Agent: Identif	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE STATE Felephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A pries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the second state of Bank, Depository, etc.	CITY A pries: List all banks or other depositories in which	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the second state of Bank, Depository, etc.	CITY A pries: List all banks or other depositories in which	Telephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisin ç	Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected (Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
Mailing Address	PO BOX 7244		
	LITTLE ROCK	AR	72217
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	ative Leadership PAC Sp
	Organization Affiliated Committee Joby name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify Full Name		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify Full Name		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or main ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
MANN VICTORY	FUND		
Mailing Address	PO BOX 1084		
	SALINA	, , , KS ,	67402
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	ed Committee, Joint Fu	FEC ID FEC ID	number number number number	C C C
Organization, Affiliat		FEC ID	number	С
Organization, Affiliat		FEC ID		
Organization, Affiliat		J	number	C
	ed Committee, Joint Fu			
	ed Committee, Joint Fu			
UBA ELIVID		ndraising Repi	esentative	, or Leadership PAC Spons
		1 1 1 1 1	1 1 1	
PO BOX 67237				
TOPEKA		, , , , ,	KS	66667
	CITY A		STATE A	ZIP CODE ▲
by name, address (p	phone number – optional)			
▼	CITY A	S	TATE A	ZIP CODE ▲
		Telephone Nu	mber	
	Organization Af	TOPEKA CITY Organization Affiliated Committee by name, address (phone number – optional)	TOPEKA CITY Organization Affiliated Committee V Joint Fundraising by name, address (phone number – optional)	TOPEKA CITY STATE Organization Affiliated Committee Joint Fundraising Representa by name, address (phone number – optional)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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D BOX 244 LINTON CITY	STATE A Telephone Number	Leadership PAC Spanish PAC Spa
DBOX 244 CITY ame, address (phone number – option CITY CITY cist all banks or other depositories in	STATE A Telephone Number	ZIP CODE Antative Leadership PAC Sp
DBOX 244 CITY ame, address (phone number – option CITY CITY cist all banks or other depositories in	STATE A Telephone Number	ZIP CODE Antative Leadership PAC Sp
DBOX 244 CITY ame, address (phone number – option CITY CITY cist all banks or other depositories in	STATE A Telephone Number	ZIP CODE Antative Leadership PAC Sp
DBOX 244 LINTON CITY mization Affiliated Committee Ame, address (phone number – option	STATE A	ZIP CODE Antative Leadership PAC Sp
DBOX 244 LINTON CITY mization Affiliated Committee Ame, address (phone number – option	STATE A	ZIP CODE Antative Leadership PAC Sp
DBOX 244 LINTON CITY mization Affiliated Committee Ame, address (phone number – option	STATE A Joint Fundraising Represe al)	ZIP CODE Antative Leadership PAC Sp
DBOX 244 CITY Inization Affiliated Committee Affiliated Committee	STATE A Joint Fundraising Represe al)	ZIP CODE Antative Leadership PAC Sp
DBOX 244 LINTON CITY Affiliated Committee	NY STATE A Joint Fundraising Represe	ZIP CODE A
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DBOX 244 LINTON CITY Affiliated Committee	NY STATE A Joint Fundraising Represe	ZIP CODE A
DBOX 244 LINTON CITY Affiliated Committee	NY STATE A Joint Fundraising Represe	ZIP CODE A
D BOX 244 LINTON CITY	NY STATE A	ZIP CODE A
D BOX 244	NY	
) BOX 244		13323
ongress Victory Fund		
	Fundraising Representat	ve, or Leadership PAC Spon
		<u> </u>
	I FEC ID number	
	nization, Affiliated Committee, Joint I	FEC ID number

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) or ((h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
-				
6. N		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	ADERHOLT MAJO	JRITT FUND		
	Mailing Address	831 LINWOOD CT		
	Maining Address			
		BIRMINGHAM	, , AL ,	35222
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
			Fundraising Representa	
	Connected	Allillated Committee 700mt F	-unuraising nepresent	Leadership FAC Sponsor
_				
8. D	Designated Agent: Identify	by name, address (phone number - optional)		
8. D		by name, address (phone number – optional)		
8. D	Full Name	by name, address (phone number – optional)		
8. D		by name, address (phone number – optional)		
8. D	Full Name	by name, address (phone number – optional)		
8. D	Full Name			
	Full Name	CITY A	STATE A	ZIP CODE A
8. D	Full Name	CITY A	STATE A	
_	Full Name	CITY A	ephone Number	ZIP CODE 🛦
	Full Name	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. B s.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or main	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. B s.	Full Name Mailing Address TITLE OR POSITION	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. B s.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mails and the state of Bank,	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. B s.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mailane of Bank, Depository, etc.	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. B s.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mailane of Bank, Depository, etc.	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
DIANA VICTORY	′ FUND		
<u> </u>			
Mailing Address	PO BOX 7208		
	KINGSPORT	TN	37664
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
	ed Organization Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	st Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\underline{\frac{117}{}}$ of $\underline{\frac{213}{}}$

h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising Representativ	e, or Leadership PAC Spons
GUS BILIRAKIS	VICTORY FUND		
Mailing Address	PO BOX 2485		
	SPRINGFIELD	, , VA	22152
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	state A	
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY	STATE A	
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h). Joint Fundraisin		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
BIGGS VICTORY	COMMITTEE		
Mailing Address	228 S WASHINGTON STREET		
mailing / taureee	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
	Organization Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
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esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY Tes: List all banks or other depositories in which	STATE A	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY Tes: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, epository, etc. Mailing Address	N ▼ ories: List all ba	CITY A nks or other depositories in	Telephone		ZIP CODE A ts funds, holds accounts, rent
anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	N ▼ ories: List all ba	CITY A	Telephone	Number	ZIP CODE A
TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	N ▼ ories: List all ba	CITY A	Telephone	Number	ZIP CODE A
TITLE OR POSITION	N ▼ ories: List all ba	CITY A	Telephone	Number	ZIP CODE A
				STATE A	
Mailing Address				1 . 1	1 1-1
Mailing Address				1 1 1 1	
Mailing Address					
esignated Agent: Identi	fy by name, add	ress (phone number – opti	ional)		
	ed Organization	Affiliated Committee	Joint Fundraisi	ng Represent	ative Leadership PAC Sp
Relationship:		CITY A	_	STATE ▲	ZIP CODE ▲
	HUDSON			WI	54016
Mailing Address	PO BOX 183	3			
	_				
<u> </u>					
ame of Any Connected	_		nt Fundraising Ro	epresentativ	e, or Leadership PAC Spons
4.					
				D number	C
3.				D number	C
3.			ı FFC	D number	С
1				D number	С

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Page $\underline{\frac{120}{}}$ of $\underline{\frac{213}{}}$

Э.	Full Name Mailing Address TITLE OR POSITION	CITY Telephone ries: List all banks or other depositories in which the con	STATE A e Number nmittee deposit	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	CITY Telephone ries: List all banks or other depositories in which the con	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	CITY Telephone ries: List all banks or other depositories in which the con	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank,	CITY Telephone ries: List all banks or other depositories in which the con-	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION	CITY Telephone ries: List all banks or other depositories in which the con-	STATE A	ZIP CODE A
8.	Full Name Mailing Address	CITY A	STATE A	
8.	Full Name Mailing Address	CITY A		
8.	Full Name			
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.		y by name, address (phone number – optional)		
8.	Designated Agent: Identify	y by name, address (phone number - optional)		
			<u> </u>	
		d Organization		
	Relationship:	SHIRLEY CITY	STATE A	ZIP CODE ▲
		SHIRLEY	NY	, 11967
	Mailing Address	47 FLINTLOCK DR		
6.	Name of Any Connected SALAZAR VICTO	Organization, Affiliated Committee, Joint Fundraising ORY COMMITTEE	Representative	e, or Leadership PAC Sponsor
	4	FEC	C ID number	C
	3.		C ID number	C
	2.		C ID number	С
	1.	FEC	C ID number	C
		3 . a. voibaire		
5(g) o	or(h). Joint Fundraisin	ng Participant:		

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
TEAM CHENEY			
Mailing Address	3538 SOUTH WAKEFIELD ST.		
	ARLINGTON	VA VA	22206
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	
esignated Agent: Identif	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		Leadership PAC Sp
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	CITY A CITY A pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	CITY A CITY A pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A CITY A pries: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
ELISE VICTORY	FUND		
Mailing Address	PO BOX 500		
	GLEN FALLS	NY	12801
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi		FEC ID number	C
2.		FEC ID number	C
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ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
SERVANT LEAD	ERSHIP FUND		
	824 S. MILLEDGE AVE STE 101		
Mailing Address			
	ATUTUO		00005
	ATHENS	GA L	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint Joint ify by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** _____

h). Joint Fundraisi		FEC ID number	С
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3.			
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
BICE VICTORY			
Mailing Address	PO BOX 21315		
Maining Addiess			
	OKLAHOMA CITY	ı ı OK ı	73156
Relationship:			
neiationsnip.	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint Joint Jo	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
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esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Spanish
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
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h). Joint Fundraisi		FEC ID number	С
1.		FEC ID number	C
2.			
3.		FEC ID number	C
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ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Renresentativ	e or Leadershin PAC Snon
GARBARINO VI		along Hoprocontaits	s, or Leadership 1 Ac open
Mailing Address	PO BOX 101		
	BAYPORT	NY	11705
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee Joint fy by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
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5(g) or (l	h). Joint Fundraisin	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	C
_				
6. N		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	BURGESS OWEN	NS VICTORY COMMITTEE		
		824 S MILLEDGE AVE STE 101		
	Mailing Address	02-4 0 MILLES 02 7/12 012 101		
		ATHENS	GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sponsor
_				
8. D e	esignated Agent: Identify	by name, address (phone number – optional)		
8. D e	esignated Agent: Identify	by name, address (phone number – optional)		
8. D e		by name, address (phone number – optional)		
8. D e	Full Name	by name, address (phone number – optional)		
— 8. D €	Full Name	by name, address (phone number – optional)		
— 8. D •	Full Name	CITY A	STATE A	ZIP CODE A
8. D 6	Full Name	CITY A	STATE A	
9. B 3	Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or maintenance.	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
 9. B i sa	Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
 9. B i sa	Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposition are of Bank,	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
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 9. B i sa	Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦

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(g) or (h). Joint Fundra	ising Participant:		
1.		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	С
	ted Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Sponsor
2022 PHASE I	PAIRIOI DAI JFC		
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115 		
	ALEXANDRIA	L VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Conne	ected Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sponso
Designated Agent: Ide	entify by name, address (phone number - optional)		
ruii ivaille			
Mailing Address			
	CITY A	STATE A	ZIP CODE A
Mailing Address	ION ▼ CITY ▲		
Mailing Address TITLE OR POSITI Banks or Other Depo safety deposit boxes of	CITY ▲ sitories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE 🛦
Mailing Address TITLE OR POSITI Banks or Other Depo safety deposit boxes of Name of Bank, Depository, etc.	Sitories: List all banks or other depositories in whice r maintains funds.	STATE A Telephone Number	ZIP CODE A
Mailing Address TITLE OR POSITI Banks or Other Depo safety deposit boxes of	Sitories: List all banks or other depositories in whice r maintains funds.	STATE A Telephone Number	ZIP CODE A
Mailing Address TITLE OR POSITI Banks or Other Depo safety deposit boxes of Name of Bank, Depository, etc.	Sitories: List all banks or other depositories in whice r maintains funds.	STATE A Telephone Number	ZIP CODE A

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Page ____ **of** ______

h). Joint Fundraisi	ng Farticipant.		
1.		FEC ID number	C
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3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected TDOCX	d Organization, Affiliated Committee, Joint Fundr	raising Representativ	e, or Leadership PAC Spon
Mailing Address	PO BOX 30844		
Maining Address			
	BETHESDA	, MD,	20824
Dalatianakin			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint J	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
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4		FEC ID number	С
1.		FEC ID number	C
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ame of Any Connected	Organization, Affiliated Committee, Joint Funds	raising Representative	e, or Leadership PAC Spon
COMER VICTOR	Y FUND		
			1 1 1 1 1 1 1 1
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	y by name, address (phone number – optional)	t Fundraising Hepresenta	Leadership PAC S
esignated Agent: Identif		t Fundraising Hepresenta	Leadership PAC S
esignated Agent: Identif		Fundraising Hepresenta	Leadership PAC S
esignated Agent: Identif		T-Fundraising Hepresenta	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	STATE A	Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name _ _ Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
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esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundraisi r	ig i uniopuni.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spons
WAGNER-MCHE	NRY VICTORY		
1			
Mailing Address	6269 LEESBURG PIKE		
	B7 		
	FALLS CHURCH	VA	22044
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Join y by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
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FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h)

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824 S MILLEDGE AVE			
STE. 101			
ATHENS		GA	30605
CI	TY 🛦	STATE 4	ZIP CODE ▲
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\frac{132}{}$ of $\frac{213}{}$

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Relationship:		CITY ▲		STATE A	ZIP CODE ▲
	ATHENS			GA	30605
	STE 101				
Mailing Address	824 S MILLEDG	GE AVE			
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ame of Any Connected		iliated Committee, Joint Fu	ndraising Rep	resentativ	e, or Leadership PAC Spons
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FEC Form 1S (Revised 02/2017)

Page $\frac{133}{}$ of $\frac{213}{}$

n). Joint Fundraising	Participant:			
1.		FEC	ID number	C
2.		FEC	ID number	C
3.		FEC	ID number	С
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=	Organization, Affiliated Committee, Joi	int Fundraising F	Representativ	e, or Leadership PAC Spor
GRANGER VICTO	RY COMMITTEE			
Mailing Address	PO BOX 9891			
	ARLINGTON		L ∨A	22219
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	X Joint Fundrais	sing Represent	ative Leadership PAC S
	Organization Affiliated Committee by name, address (phone number – op		sing Represent	ative Leadership PAC S
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FEC Form 1S (Revised 02/2017)

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h). Joint Fundraising				
1.		FEC	ID number	С
2.		FEC	ID number	C
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4.		FEC	ID number	C
	Organization, Affiliated Committee, Jo	int Fundraising F	Representativ	e, or Leadership PAC Spor
MIKE GARCIA VIC	CTORY FUND			
Mailing Address	9070 IRVINE CENTER DRIVE #150			
	IRVINE		CA	92618
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	X Joint Fundrais	sing Represent	ative Leadership PAC S
	Organization Affiliated Committee by name, address (phone number – op		sing Representa	ative Leadership PAC S
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Page $\frac{135}{}$ of $\frac{213}{}$

h). Joint Fundrais		FEC ID number	С
		FEC ID number	С
2.		FEC ID number	C
3.			
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
JERRY CARL VI	CTORY COMMITTEE		
 , , , , , , , , ,			
	PO BOX 852138		
Mailing Address			
	MOBILE	AL	36685
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
=	d Organization, Affiliated Committee, Joint Fundr IOINT FUNDRAISING COMMITTEE	raising Representative	e, or Leadership PAC Spor
Mailing Address	370 EAST SOUTH TEMPLE STE 580		
Ü			
	SALT LAKE CITY	ı ıUTı	84111
Relationship:	CITY A	STATE A	ZIP CODE A
		t Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number - optional)		ative Leadership PAC S
Full Name	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
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Full Name	CITY	STATE A	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION	CITY A	elephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY ▲ CITY ▲ Te ories: List all banks or other depositories in which	elephone Number	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\underline{^{137}}$ of $\underline{^{213}}$

5(g) or	(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
-				
6.	Name of Any Connected PFLUGER VICTO	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	PFLOGER VICTO			
	Mailing Address	PO BOX 30844		
	Walling Address			
		BETHESDA	, MD,	, 20824
	Relationship:	CITY ▲	STATE A	ZIP CODE A
_	Connected	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sponsor
8. I	Designated Agent: Identify	by name, address (phone number - optional)		
8. I		by name, address (phone number - optional)		
8. I	Full Name	y by name, address (phone number – optional)		
8. I		by name, address (phone number – optional)		
8. I	Full Name	by name, address (phone number – optional)		
8. I	Full Name			
8. I	Full Name	CITY A	STATE A	ZIP CODE A
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- 9. I	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mainly deposit boxes or mainly depository, etc.	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦

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h). Joint Fundraisin	g Participant:				
1.			F	FEC ID number	С
2.				FEC ID number	С
3.				FEC ID number	С
4.			F	FEC ID number	С
ame of Any Connected		ed Committee, Joir	nt Fundraisii	ng Representativ	ve, or Leadership PAC Spor
NEHLS VICTORY					
Moiling Address	1612 CRABB RIVER	RRD			
Mailing Address					
	DICHMOND				, 77469
5.1	RICHMOND			TX	
Relationship:		CITY A		STATE A	ZIP CODE ▲
Connected	Organization Affi	liated Committee	X Joint Fun	draising Represen	tative Leadership PAC S
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h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
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lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 51522		
	AMARILLO	, , TX	79159
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
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Page $\frac{140}{}$ of $\frac{213}{}$

1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.			
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spons
TONY GONZALE	ES VICTORY FUND		
Mailing Address	12000 STARCREST DR		
Mailing Address	STE 101		
	SAN ANTONIO	TX	78247
Relationship:	CITY A	STATE A	ZIP CODE A
		t Fundraising Represent	Leadership PAC Sp
	Affiliated Committee Joint fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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or(h). Joint Fundraisir	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	C
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SHEDD VICTOR		ising riepiesentativ	c, or Ecadership 1 Ao oponsor
Mailing Address	PO BOX 365		
	MCLEAN	, , , VA ,	22101
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC Spons
	Affiliated Committee Joint F	Fundraising Represent	ative Leadership PAC Spons
Designated Agent: Identif		Fundraising Represent	Leadership PAC Spons
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ______

(h). Joint Fundraising	Participant:		
1.		FEC ID number	С
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lame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representativ	e, or Leadership PAC Spon
ISSA VICTORY FU	JND		
Mailing Address	9070 IRVINE CENTER DRIVE		
	SUITE 150		
	IRVINE	CA CA	92618
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify	Organization Affiliated Committee Joi	nt Fundraising Represent	ative Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
GOODEN VICTO	JRY FUND		
	₁ 75 S HIGH ST		
Mailing Address			
	STE. 4		
	DUBLIN	OH OH	43017
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ______

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
HOUSE MAJOR	TY TRUST		
	228 S WASHINGTON STREET SUITE 115		
Mailing Address	223 5 W.G. III. G. I. G.		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or marked to the content of the con	fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Cries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
WOMACK MAJOR	RITY FUND		
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	, , VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
	Organization Affiliated Committee X Joint by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
		t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identify		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identify		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identify	by name, address (phone number – optional)	t Fundraising Represent	
Pesignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identify	by name, address (phone number – optional) CITY		
Pesignated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY Teles: List all banks or other depositories in which	STATE A	ZIP CODE A

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Page $\frac{146}{}$ of $\frac{213}{}$

(h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponse
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identif	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership FAC Spc
Full Name			Leadership FAC Spc
		Tunuraising nepresent	ative Leadership PAC Spo
Full Name		Tunuraising nepresent	LeaderShip FAC Spc
Full Name		Tunuraising Nepresenta	Leadership FAC Spc
Full Name	y by name, address (phone number – optional)	STATE A	
Full Name	y by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the second process of the second	y by name, address (phone number – optional) CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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Page _____ **of** _____

n). Joint Fundraising		1 -		
1.			EC ID number	C
2.		F	EC ID number	C
3.		F	EC ID number	C
4.		F	EC ID number	С
ame of Any Connected C	rganization, Affiliated Committee, Joi	nt Fundraisin	g Representativ	e, or Leadership PAC Spor
BRADY VICTORY	FUND			
Mailing Address	8505 TECHNOLOGY FOREST PLACE			
	SUITE 702			
	THE WOODLANDS		TX	77381
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Organization Affiliated Committee	X Joint Fund	draising Represent	
Connected				
Connected esignated Agent: Identify	Organization Affiliated Committee			
Connected esignated Agent: Identify Full Name	Organization Affiliated Committee			
Connected esignated Agent: Identify Full Name	Organization Affiliated Committee by name, address (phone number – opt	ional)	draising Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization Affiliated Committee Dy name, address (phone number – opt	ional)	draising Represent	
Connected esignated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee Dy name, address (phone number – opt	ional)	draising Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee by name, address (phone number – opt	ional)	STATE A	Ative Leadership PAC S
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositorifety deposit boxes or main ame of Bank,	Affiliated Committee by name, address (phone number – opt	ional)	STATE A	Ative Leadership PAC S
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositoring fety deposit boxes or main arme of Bank, epository, etc.	Affiliated Committee by name, address (phone number – opt	ional)	STATE A	Ative Leadership PAC S

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ______

h). Joint Fundraisin	g raiticipant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
TEAM MCHENRY	(
	228 S. WASHINGTON STREET		
Mailing Address			
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint y by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representa	
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mails are of Bank,	y by name, address (phone number – optional) CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depository, etc.	y by name, address (phone number – optional) CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depositors, etc.	y by name, address (phone number – optional) CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A

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Page ____ **of** _____

(h). Joint Fundraising	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
Mailing Address	PO BOX 6545		
	VISALIA	L CA	93290
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected		int Fundraising Represent	ative Leadership PAC Spo
Connected	Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify	Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name	Organization Affiliated Committee Joint Jo	int Fundraising Represent	ative Leadership PAC Spo
Connected Designated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee Joint Jo		
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Organization Affiliated Committee Joint Jo	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors of Bank, Depository, etc.	Organization Affiliated Committee Joint Jo	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) o	r(h). Joint Fundraisin	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	NRSC/NRCC VIC	TORY COMMITTEE		
	Mailing Address	228 S WASHINGTON STREET #115		
	Walling Address			
		ALEXANDRIA	ı VA ı	, 22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name Mailing Address	CITY A	STATE A	
8.	Full Name Mailing Address	CITY A	1	
	Full Name Mailing Address TITLE OR POSITION	CITY A Tel ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main	CITY A Tel ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION	CITY A Tel ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail	CITY A Tel ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY A Tel ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
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n). Joint Fundraising	•					
1.				FEC ID numbe		
2.				FEC ID numbe	r C	
3.				FEC ID numbe	r C	
4.				FEC ID numbe	r C	
ame of Any Connected C	_	iated Committee, J	oint Fundrai	sing Representat	tive, or Le	adership PAC Spor
HUDSON FREEDO	OM FUND					
Mailing Address	228 S WASHING	STON ST STE 115				
	ALEYANDRIA			1/0	20	244
	ALEXANDRIA			VA VA		314
Relationship:		CITY A		STATE	A	ZIP CODE ▲
		Affiliated Committee		undraising Represe	entative	Leadership PAC S
Connected esignated Agent: Identify Full Name				fundraising Represe	entative	Leadership PAC S
esignated Agent: Identify				undraising Represe	entative	Leadership PAC S
esignated Agent: Identify Full Name				undraising Represe	entative	Leadership PAC S
esignated Agent: Identify Full Name	by name, address		optional)			Leadership PAC S
esignated Agent: Identify Full Name	by name, address	(phone number – c	optional)			
esignated Agent: Identify Full Name Mailing Address	by name, address	(phone number – c	optional)			
esignated Agent: Identify Full Name Mailing Address	by name, address	(phone number – c	optional)	STATE A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Tanks or Other Depositori	by name, address	(phone number – c	optional)	STATE A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or main	by name, address	(phone number – c	optional)	STATE A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or main ame of Bank, epository, etc.	by name, address	(phone number – c	optional)	STATE A		ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** _____

	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Compositor	A Commission Affiliated Committee Laint	Frankraining Danganantati	o ou Loodoughin DAC Chana
	I Organization, Affiliated Committee, Joint PRY COMMITTEE	rundraising nepresentativ	e, or Leadership FAC Spons
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
Full Name	1		
Mailing Address			
TITLE OD DOCITION	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	CITY ▲	STATE ▲ Telephone Number	ZIP CODE A
Banks or Other Deposite safety deposit boxes or m	ories: List all banks or other depositories in anintains funds.	Telephone Number	ts funds, holds accounts, rents
Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in an aintains funds.	Telephone Number	ts funds, holds accounts, rents

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
SCHWEIKERT	ICTORY COMMITTEE		
	228 S WASHINGTON STREET STE 115		
Mailing Address			
	N 5 X A X 5 X A X 5 X A X A X A X A X A X		00044
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of the serious part of the serious	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of Bank,	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** _____

1 2 3							
				FEC II	0 number	С	
3				FEC II	0 number	С	
				FEC II	0 number	С	
4.				FEC II	O number	С	
			liated Committee, Join	Fundraising Re	oresentativ	e, or Leade	ership PAC Sponse
SCALI	ISE LEADER	RSHIP FUND					
Maili	on Address	PO BOX 9891					
Maiii	ng Address						
		ARLINGTON			ı VA ı		
Doloi	i anahin.	ARCHOTOR					
Helat	tionship:	_	CITY ▲		STATE ▲	_	ZIP CODE ▲
Full Na		1					
Mailing	Address						
			CITY		CTATE A		7ID CODE A
TITLE	OR POSITION	▼	CITY A		STATE A		ZIP CODE ▲
				Telephone N			1 1

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\frac{155}{}$ of $\frac{213}{}$

h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
MCCAUL VICTO	RY FUND		
Mailing Address	PO BOX 341027		
	AUSTIN	TX TX	78734
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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h). Joint Fundraisi	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
WRIGHT VICTO	RY FUND		
	_I 75 S HIGH ST		
Mailing Address			
	STE. 4		
	DUBLIN 	OH OH	43017
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Represent	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi	ed Organization Affiliated Committee	nt Fundraising Representation	Leadership PAC Sport
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee	nt Fundraising Representation	
esignated Agent: Identi	Affiliated Committee X Join To provide the description of the provided Affiliated Committee X Join To provide the provided Affiliated Committee X Join To provided Affiliated Committee X Join To provide the provided Affiliated Committee X Join To provide		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) or	(h). Joint Fundraisir	ng Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	C
-				
6. I		Organization, Affiliated Committee, Joint Fundra		e, or Leadership PAC Sponsor
	TEAM BOEBERT	JOINT FUNDRAISING COMMITTEE		
		PO BOX 752		
	Mailing Address			
		RIFLE	L CO	81652
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
- 3. c	Designated Agent: Identif	y by name, address (phone number – optional)		
- 3. [Designated Agent: Identif	y by name, address (phone number – optional)	1 1 1 1 1 1 1	
- 8. C		y by name, address (phone number – optional)		
- 8. C	Full Name	y by name, address (phone number – optional)		
- 8. C	Full Name	y by name, address (phone number – optional)		
- 8. C	Full Name	CITY A	STATE A	ZIP CODE A
- 8. C	Full Name	CITY A	STATE A	
 	Full Name Mailing Address TITLE OR POSITION	CITY CITY Tel wries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
 	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor defety deposit boxes or mainly deposit boxes or mainly deposit boxes.	CITY CITY Tel wries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
 	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor of Bank, Depository, etc.	CITY CITY Tel wries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
_ 9. E s	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor of Bank, Depository, etc.	CITY CITY Tel wries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦

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h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
FALLON VICTOR	RY FUND		
Mailing Address	PO BOX 3653		
	DUBLIN	OH	43016
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
	Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
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h). Joint Fundraisi	ng Participant:	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Representative	e. or Leadership PAC Spon
NUNES LEADER	_		
	P.O. BOX 6545		
Mailing Address			
	MEALIA		03300
	VISALIA	CA	93290
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee	t Fundraising Representa	tive Leadership PAC Sp
		Trundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Trundraising Representation	Leadership PAC S
esignated Agent: Identi		Trundraising Representation	Leadership PAC S
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esignated Agent: Identi	ify by name, address (phone number – optional)	STATE A	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A

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Page ____ **of** ______

5(g) or (h).). Joint Fundraising	g Participar	nt:												
	1.						J	FEC	D numbe				-	_	<u>_</u>
	2.						J	FEC	D numbe	C					
:	3.							FEC	D numbe	C					
	4.						J 	FEC	D numbe	С			_	_	
	me of Any Connected G	_	n, Affiliat	ed Com	mittee, Jo	oint Fu	ndrais	ing Re	epresentat	ive, or	Leade	rship I	PAC S	ponso	or
L															
	Mailing Address	PO BOX	630167												
		IRVING							TX		75063				
	Relationship:			CITY	Y 🔺				STATE	A		ZIP (CODE	A	
	Connected	d Organization	n Af	ffiliated Co	ommittee	x J	oint Fu	ndraisii	ng Represe	ntative		eaders	hip PA	C Spo	nsor
	signated Agent: Identify	by name, a	address (p	ohone nu	ımber – o	ptional))								
	Mailing Address					1 1	1 1	1 1							
								<u> </u>					-		
	TITLE OR POSITION	↓		CITY					STATE A			ZIP CO			<u> </u>
	TITLE OR POSITION	U		CITY	A		Telep	phone				ZIP CC			
safe Nan	nks or Other Depositor ety deposit boxes or ma	ries: List all				s in whi			STATE A	L			<u> </u>		
safe Nan	nks or Other Depositor ety deposit boxes or ma me of Bank, pository, etc.	ries: List all				s in whi			STATE A	L			<u> </u>		
safe Nan	nks or Other Depositor ety deposit boxes or ma	ries: List all				s in whi			STATE A	L			<u> </u>		
safe Nan	nks or Other Depositor ety deposit boxes or ma me of Bank, pository, etc.	ries: List all				s in whi			STATE A	L			<u> </u>		

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) o	or(h). Joint Fundraisin	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	VICTORY 2022			
	Mailing Address	22780 INDIAN CREEK DRIVE, STE 100		
	Maining Addition			
		DULLES	ı VA ı	, 20166
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
			Fundraising Representa	
	Connected	Anniated Committee . Control	Turidialing Tiepreseria	Leadership 1 AO oponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name		CTATE A	ZIR CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name Mailing Address	CITY A	STATE A	
	Full Name Mailing Address TITLE OR POSITION	CITY A	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION	CITY CITY Teles: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION	CITY CITY Teles: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail	CITY CITY Teles: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank,	CITY CITY Teles: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main that the same of Bank, Depository, etc.	CITY CITY Teles: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main that the same of Bank, Depository, etc.	CITY CITY Teles: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page _____ **of** ______

(h). Joint Fundraisii	ig Participant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Sponse
Mailing Address	824 S MILLEDGE AVE		
	ST 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif	d Organization Affiliated Committee Jacky Joseph Jacky Strategy Affiliated Committee Jacky Joseph Jacky Joseph Jacky Joseph Jacky Joseph Jacky Joseph Jacky	int Fundraising Represent	ative Leadership PAC Spo
		oint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif	y by name, address (phone number – optional)	sint Fundraising Represent	Leadership PAC Spo
Designated Agent: Identif	y by name, address (phone number – optional)		
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite cafety deposit boxes or management of Bank,	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi i	1	FFC ID :=	С
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
HICE FREEDOM	FUND		
Mailing Address	2470 DANIELLS BRIDGE ROAD		
	SUITE 121		
	ATHENS	GA L	30606
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	Affiliated Committee	t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identii Full Name Mailing Address	by by name, address (phone number – optional) CITY		
esignated Agent: Identification of the Full Name TITLE OR POSITION anks or Other Depositor	cy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** _____

anks or Other Deposite defety deposit boxes or mame of Bank, epository, etc. Mailing Address	l ▼ pries: List all ban	CITY ks or other depositories in whether the state of t	STATE A	ZIP CODE A ZIP CODE A osits funds, holds accounts, ren
anks or Other Depositoratety deposit boxes or mame of Bank, epository, etc.	l ▼ pries: List all ban	CITY A	STATE A	ZIP CODE A
anks or Other Depositorafety deposit boxes or mane of Bank,	l ▼ pries: List all ban	CITY A	STATE A	ZIP CODE A
anks or Other Deposito	l ▼ pries: List all ban	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION			STATE 4	
TITLE OR POSITION			STATE 4	
TITLE OR POSITION				
			<u> </u>	<u> </u>
Mailing Address				
Full Name				
esignated Agent: Identif	fy by name, addre	ess (phone number – optiona)	
Connecte	ed Organization	Affiliated Committee	Joint Fundraising Repres	entative Leadership PAC S
Relationship:		CITY A	STATE	ZIP CODE ▲
	OTTAWA		IL IL	61350
Mailing Address	P.O. BOX 238	31 		
		ffiliated Committee, Joint Fo	ındraising Representa	ative, or Leadership PAC Spon
4.			FEC ID number	er C
0.			FEC ID numbe	er C
3.			FEC ID numbe	er C
1				

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h). Joint Fundraisi n	g i articipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Mailing Address	824 S. MILLEDGE AVENUE		
ag / taaooo	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE A	ZIP CODE A
		Fundraising Representa	ative Leadership PAC Sp
Connected		Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	d Organization Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify	Affiliated Committee		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee y by name, address (phone number – optional) CITY Terries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	Affiliated Committee y by name, address (phone number – optional) CITY Terries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee y by name, address (phone number – optional) CITY Terries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	•		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
MULLIN VICTOR	Y FUND		
Mailing Address	332 W. LEE HIGHWAY		
J. J	#303		
	WARRENTON	VA	20186
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	С
4.			FEC ID number	C
	of Any Connected C	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA		20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	nated Agent: Identify	by name, address (phone number – optional)		
Ma	ailing Address			
Т	TITLE OR POSITION •	CITY ▲	07475	7ID 00DE +
	TILE ON POSITION 1	7	STATE ▲	ZIP CODE ▲
L	IILE OR POSITION V		STATE ▲ phone Number	ZIP CODE A
safety		Telepes: List all banks or other depositories in which the	phone Number	
safety Name	s or Other Depositoric deposit boxes or main	Telepes: List all banks or other depositories in which the	phone Number	
safety Name	s or Other Depositoric deposit boxes or main of Bank,	Telepes: List all banks or other depositories in which the	phone Number	
safety Name	s or Other Depositoric deposit boxes or mair of Bank, sitory, etc.	Telepes: List all banks or other depositories in which the	phone Number	

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h). Joint Fundraisin	g Participant:		
1		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	C
		FEC ID number	C
4. [
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
FRIENDS OF BUI	RCHETT		
<u> </u>			
Mailing Address	95 WHITE BRIDGE RD		
	SUITE 207		
	NASHVILLE	TN	37205
Deletienekie	CITY A	STATE A	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sp
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
Connected esignated Agent: Identify	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representation	
Connected esignated Agent: Identify Full Name	Affiliated Committee y Joint y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee y Joint y by name, address (phone number – optional) CITY	STATE A	ative
Connected nated Agent: Identify Il Name Liling Address TLE OR POSITION or Other Depositor deposit boxes or ma of Bank, tory, etc.	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y Joint y by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) or (h).	Joint Fundraising	Participant:				
1.			FEC	ID number	C	
2.			FEC	ID number	C	
3.			FEC	ID number	С	
4.			FEC	ID number	С	
	of Any Connected C	Organization, Affiliated Committee COMMITTEE	, Joint Fundraising F	epresentative	e, or Leadership PA	.C Sponsor
V	Mailing Address	4031 THICKET LANE				
		HARRISBURG		PA	17110	- , , ,
F	Relationship:	CITY A		STATE ▲	ZIP CC	DDE 🛦
		by name, address (phone number	- optional)			
Ful	I Name					
Ma						
	iling Address					
	iling Address					
	iling Address					- [, , , ,
	iling Address TLE OR POSITION	CITY A		STATE A	ZIP COD	- L
		CITY A	Telephone		ZIP COD	-
9. Banks safety of Name of Deposit	TLE OR POSITION	es: List all banks or other deposito		Number		
9. Banks safety of Name of Deposit	or Other Depositorideposit boxes or main of Bank, tory, etc.	es: List all banks or other deposito		Number		
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h). Joint Fundraisi		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
JUDGE CARTER	R VICTORY FUND		
Mailing Address	22780 INDIAN CREEK DR.		
Mailing Address	SUITE 100		
	DULLES	, VA	20166
Relationship:			
neialionship.	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spanish
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(g) or (h). Joint Fundraisi ı	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	I Organization, Affiliated Committee, Joint Fundra N VICTORY COMMITTEE	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	P.O. BOX 341027		
	AUSTIN	, TX	78734
Relationship:	CITY ▲	STATE A	ZIP CODE A
	ed Organization Affiliated Committee Joint F	Fundraising Representa	ative Leadership PAC Sponso
Full Name	<u> </u>		
Mailing Address			
TITLE OR POSITION	CITY ▲	STATE ▲	ZIP CODE ▲
		ephone Number	
Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	pries: List all banks or other depositories in which the anintains funds.	he committee deposit	s funds, holds accounts, rents
Mailing Address	I		
Mailing Address			
Mailing Address			

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** _____

5(g) or (h).	Joint Fundraising	y Participant:		
-	1		FEC ID number	C
2	2		FEC ID number	C
(3.		FEC ID number	C
	4.		FEC ID number	C
	ne of Any Connected C	Organization, Affiliated Committee, Joint Fundrais	ing Representative	e, or Leadership PAC Sponsor
L				
	Mailing Address	320 FIRST STREET SOUTHEAST		
		WASHINGTON	DC	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ignated Agent: Identify Full Name	by name, address (phone number - optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telep	phone Number	
safe	ty deposit boxes or mail	ies: List all banks or other depositories in which the intains funds.	committee deposit	s funds, holds accounts, rents
safe Nam			committee deposit	es funds, holds accounts, rents
safe Nam	ty deposit boxes or main		committee deposit	es funds, holds accounts, rents
safe Nam	ne of Bank, ository, etc.		e committee deposit	s funds, holds accounts, rents

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) or (h).	Joint Fundraisin	g Participant:		
1.			FEC ID number	С
2. [FEC ID number	С
3. [FEC ID number	С
4. [FEC ID number	С
		Organization, Affiliated Committee, Joint Fu	ndraising Representativ	ve, or Leadership PAC Sponsor
	E VALADAO V	ICTORY FUND		
N	failing Address	5132 N PALM AVE		
	J	NUM 227		
		FRESNO	CA	93704
P	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	oint Fundraising Represen	tative Leadership PAC Sponsor
				_
8. Design	ated Agent: Identify	y by name, address (phone number – optional)		
	ated Agent: Identify	y by name, address (phone number – optional)		
Full	Name	y by name, address (phone number – optional)		
Full		y by name, address (phone number – optional)		
Full	Name	y by name, address (phone number – optional)		
Full Mai	Name	CITY A		ZIP CODE A
Full Mai	Name	CITY A	STATE A	ZIP CODE A
Full Mai	Name	CITY A		ZIP CODE A
Full Mai	Name iling Address	CITY A	STATE ▲ Telephone Number	
Full Mai TI'	Name iling Address	CITY ▲ ries: List all banks or other depositories in whi	STATE ▲ Telephone Number	
Full Mai	Name iling Address TLE OR POSITION or Other Deposito deposit boxes or ma	CITY ▲ ries: List all banks or other depositories in whi	STATE ▲ Telephone Number	
Full Mai	Name	CITY ▲ ries: List all banks or other depositories in whi	STATE ▲ Telephone Number	
Full Mai TI Banks safety condensity	I Name illing Address TLE OR POSITION or Other Deposito deposit boxes or material boxes or material boxes.	CITY ▲ ries: List all banks or other depositories in whi	STATE ▲ Telephone Number	
Full Mai TI Banks safety condensity	I Nameilling Address TLE OR POSITION or Other Deposito deposit boxes or ma	CITY ▲ ries: List all banks or other depositories in whi	STATE ▲ Telephone Number	
Full Mai TI Banks safety condensity	I Nameilling Address TLE OR POSITION or Other Deposito deposit boxes or ma	CITY ▲ ries: List all banks or other depositories in whi	STATE ▲ Telephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** _____

1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fundr E HOUSE CALIFORNIA 2020	aising Representativ	e, or Leadership PAC Spon
Mailing Address	P.O. BOX 30844		
ag / taa			
	BETHESDA	ı MDı	20824
Relationship:			
neialionship.	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		Fundraising Represent	Ative Leadership PAC Sp
esignated Agent: Ident		Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		Fundraising Represent	Ative Leadership PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or necessarily and the second	fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit	fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank,	fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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1.			FEC ID numl	per C	
2.			FEC ID numl	per C	
3.			FEC ID numl	per C	
4.			FEC ID numl	per C	
lame of Any Connected	Organization, Affilia	ated Committee, Joint Fu	ındraising Represen	tative, or	Leadership PAC Spons
TAKE BACK THE	HOUSE TEXA	\S 2020		1 1 1	
Mailing Address	P.O. BOX 30844				
	BETHESDA		MI	D	20824
	DETTILODA				
Relationship:		CITY ▲ Affiliated Committee	STAT		ZIP CODE ▲ Leadership PAC Sp
Connecte	d Organization		Joint Fundraising Repre		
esignated Agent: Identif	d Organization	Affiliated Committee x	Joint Fundraising Repre		
Connecte esignated Agent: Identif	d Organization	Affiliated Committee x	Joint Fundraising Repre		
connecte esignated Agent: Identif	d Organization	Affiliated Committee x	Joint Fundraising Repre		Leadership PAC Sp
connecte esignated Agent: Identif	d Organization	Affiliated Committee x .	Joint Fundraising Repre	esentative	Leadership PAC Sp
connecte esignated Agent: Identif	d Organization y by name, address	Affiliated Committee x.	Joint Fundraising Repre	esentative	Leadership PAC Sp

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	.9		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Mailing Address	P.O. BOX 3864		
	SPRINGFIELD		65808
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		oint Fundraising Represent	Leadership PAC Spo
	Affiliated Committee X J		Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi	by by name, address (phone number – optional)		Leadership PAC Spo
Designated Agent: Identi Full Name Mailing Address	by by name, address (phone number – optional)		
Pesignated Agent: Identi Full Name _ _ Mailing Address TITLE OR POSITION	cy by name, address (phone number – optional) CITY CITY Pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	cy by name, address (phone number – optional) CITY CITY Pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\underline{\frac{177}{}}$ of $\underline{\frac{213}{}}$

(h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Sponso
AUSTIN SCOTT	VICTORY FUND		
Mailing Address	824 S. MILLEDGE AVENUE	1 1 1 1 1 1 1 1	
	SUITE 101		
	ATHENS	GA	30605
Dolotionobina	CITY ▲	STATE ▲	ZIP CODE ▲
Relationship: Connecte		int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif		int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee Joint		
Connecte Designated Agent: Identif	d Organization Affiliated Committee Joint	int Fundraising Represent	Ative Leadership PAC Spo
Connecte Designated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY	STATE A Telephone Number	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	d Organization Affiliated Committee Joint	STATE A Telephone Number	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	d Organization Affiliated Committee Joint	STATE A Telephone Number	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor Bafety deposit boxes or many states and safety deposit boxes or many states.	d Organization Affiliated Committee Joint	STATE A Telephone Number	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposites afety deposit boxes or mailing and	d Organization Affiliated Committee Joint	STATE A Telephone Number	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposites afety deposit boxes or mailing and	d Organization Affiliated Committee Joint	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\frac{178}{}$ of $\frac{213}{}$

(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected MAJORITY RISIN	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
Mailing Address	P.O. BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	ative Leadership PAC Sp
	Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify	Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify	Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify Full Name	Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee X Join by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify	Organization Affiliated Committee X Join by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	Organization Affiliated Committee Joint Joint Dyname, address (phone number – optional) CITY CITY Cies: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	Organization Affiliated Committee Joint Joint Dyname, address (phone number – optional) CITY CITY Cies: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ______

(h). Joint Fundraisii	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 97275		
	RALEIGH	NC NC	27624
Deletionshin	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee	at Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee	at Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee	at Fundraising Represent	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee Join Ty by name, address (phone number – optional)		
Connecte Designated Agent: Identif	d Organization Affiliated Committee Join y by name, address (phone number – optional)	st Fundraising Represent	Ative Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee Join y by name, address (phone number – optional) CITY		
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y Join y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	Affiliated Committee y Join y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ______

h). Joint Fundraisi r	<u>, , , , , , , , , , , , , , , , , , , </u>	FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
HUDSON VICTO	KY FUND		
Mailing Address	824 S. MILLEDGE AVE		
Walling Address	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE A	ZIP CODE A
	d Organization Affiliated Committee X .loint	t Fundraising Represent	ative Leadership PAC Si
Connected	d Organization Affiliated Committee Joint Joint y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
Connected		t Fundraising Representa	ative Leadership PAC Sp
Connecter connec		t Fundraising Representa	Leadership PAC S
Connecter esignated Agent: Identify Full Name		t Fundraising Representa	Leadership PAC S
Connecter esignated Agent: Identify Full Name		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spanish
Connecter esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material depositions are of Bank,	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposition of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundraisi	.g . a. a		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	I Organization, Affiliated Committee, Joint Fund	Iraising Representativ	e, or Leadership PAC Spon
TEAM BUDDY			
Mailing Address	824 S. MILLEDGE AVE		
Mailing Address	SUITE 101		
	ATHENS	, GA	30605
Deletion dele			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identii		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	STATE	
esignated Agent: Identification Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identif	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ______

(h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
lama of Any Connector	A Committee Affiliated Committee Laint Friedrich	raining Denverantative	a ay Laadayahin DAC Chan
NORTH TO THE	d Organization, Affiliated Committee, Joint Fundr FUTURE	aising nepresentative	e, or Leadership FAC Spons
Mailing Address	PO BOX 2814		
	SEWARD	, , , AK	99664
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Joint Joint by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
resignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or markets.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION Fanks or Other Deposite afety deposit boxes or make the property of the property of the position of the property of the position of the property of the propert	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or manage of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundrais ii	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
KUSTOFF VICTO	DRY FUND		
Mailing Address	1661 AARON BRENNER DR		
	SUITE 300		
	MEMPHIS	TN	38120
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	Affiliated Committee Join Join Market Market State of the Affiliated Committee		
esignated Agent: Identif	Affiliated Committee Join Join Market	st Fundraising Represent	
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee Affiliated Committee Figure 1. Join 1.		
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee Affiliated Committee Figure 1. Join 1.	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Affiliated Committee Affiliated Committee Fy by name, address (phone number – optional) CITY CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mailing and ma	Affiliated Committee Affiliated Committee Fy by name, address (phone number – optional) CITY CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Affiliated Committee Affiliated Committee Fy by name, address (phone number – optional) CITY CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Anks or Other Deposite afety deposit boxes or mame of Bank,	Affiliated Committee Affiliated Committee Fy by name, address (phone number – optional) CITY CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee Affiliated Committee Fy by name, address (phone number – optional) CITY CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee Affiliated Committee Fy by name, address (phone number – optional) CITY CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** _____

r(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponso
Mailing Address	PO BOX 68		
	SOUTH SALEM	NY	10590
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	ative Leadership PAC Spo
	by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identify		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identify Full Name		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identify Full Name		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	STATE	ZIP CODE A
Designated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mailing Name of Bank, Depository, etc.	ries: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	h). Joint Fundrais			
3	1.		FEC ID number	C
4. FEC ID number C ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spo WIN THE FUTURE FUND Mailing Address PO BOX 2485 Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization	2.		FEC ID number	С
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spo WIN THE FUTURE FUND Mailing Address PO BOX 2485 SPRINGFIELD STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC 3 esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number — Telephone Number — optional anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, refery deposit boxes or maintains funds. ame of Bank, epository, etc.	3.		FEC ID number	С
Mailing Address PO BOX 2485 SPRINGFIELD Connected Organization Affiliated Committee Joint Fundralsing Representative Leadership PAC sesignated Agent: Identify by name, address (phone number − optional) Full Name Mailing Address TITLE OR POSITION CITY STATE ZIP CODE Telephone Number	4.		FEC ID number	С
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Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC sesignated Agent: Identify by name, address (phone number – optional) Full Name		SPRINGFIELD	I VA I	22152
Connected Organization Affiliated Committee	Relationship:	CITY A	STATE A	ZIP CODE ▲
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number	Connect	ed Organization Affiliated Committee Joint	t Fundraising Representa	ative Leadership PAC S
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FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h

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3. 4. 4. Name of Any Conn	ected Organization,		FEC ID	number (
4. Name of Any Conn	ected Organization,				
4. Name of Any Conn	ected Organization,		FEC ID	number (
		Affiliated Committee. Joint			
		Affiliated Committee. Joint			
WESLEY HU			Fundraising Repre	esentative,	or Leadership PAC Spons
	NIVICIORYF	UND			
	₁ PO BOX 341	1027			
Mailing Addres	S	021			
	AUSTIN			TX	78734
Relationship:		CITY A	\$	STATE A	ZIP CODE ▲
Designated Agent: Full Name	dentify by name, add	ress (phone number – optio	nal)		
Mailing Address					
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					710 0005
TITLE OR POS	ITION ▼	CITY A	SI	ATE A	ZIP CODE ▲
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Page _____ **of** ______

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ame of Any Connected		ted Committee, Join	t Fundraisi	ng Representativ	e, or Lead	ership PAC Spon
PALAZZO VICTO	RY FUND					
Mailing Address	824 S MILLEDGE	AVENUE				
	SUITE 101					
	ATHENS			GA	3060	5 -
Relationship:		CITY A		STATE A		ZIP CODE ▲
Connected	I Organization A	ffiliated Committee	X Joint Fu	ndraising Represent	tative	Leadership PAC S
Full Name						
Mailing Address						
TITLE OR POSITION	▼	CITY A		STATE ▲		ZIP CODE ▲
			Telep	hone Number		
anks or Other Depositor		r other depositories in	which the	committee deposi	ts funds, h	olds accounts, ren
anks or Other Depositor		r other depositories ir	which the	committee deposi	ts funds, h	olds accounts, ren
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afety deposit boxes or ma ame of Bank, epository, etc.		r other depositories in	which the	committee deposi	ts funds, h	olds accounts, ren

FEC Form 1S (Revised 02/2017) for Lines 5(g

Page ____ **of** ______

n). Joint Fundraising		1	FF0 15	nber C	
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4.			FEC ID nun	nber C	
	rganization, Affiliated Com	mittee, Joint Fun	draising Represe	ntative, or	Leadership PAC Spor
HIGGINS VICTOR	COMMITTEE				
Mailing Address	228 S WASHINGTON STRE	:ET 			
	SUITE 115				
	ALEXANDRIA		<u>'</u>	/A 	22314
Relationship:	CIT	Y A	STA	TE 🛦	ZIP CODE ▲
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(h). Joint Fundraisir	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
NRCC COLORAI	Organization, Affiliated Committee, Joint Fund OO VICTORY	draising Representative	e, or Leadership PAC Spons
Mailing Address	320 1ST STREET, SE		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identif	y by name, address (phone number - optional)		
resignated Agent: Identif	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Fanks or Other Deposite dafety deposit boxes or mails and the same of Bank,	CITY A pries: List all banks or other depositories in whice	Telephone Number	
Full Name Mailing Address TITLE OR POSITION	CITY A pries: List all banks or other depositories in whice	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or mail and the composition of Bank, Depository, etc.	CITY A pries: List all banks or other depositories in whice	Telephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or mail and the proposition of Bank, depository, etc.	CITY A pries: List all banks or other depositories in whice	Telephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1.					
3.			FEC ID	number	С
			FEC ID	number	С
4			FEC ID	number	С
			FEC ID	number	C
		d Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Spon
NRCC OREGON	I VICTORY				
Mailing Address	320 1ST STREET, S	E			
ivialility Address		1 1 1 1 1 1			
	WASHINGTON			, DC ,	20003
5	WASHINGTON				
Relationship:		CITY A		STATE ▲	ZIP CODE ▲
Full Name					
Mailing Address					
TITLE OR POSITION	√	CITY A	:	STATE A	ZIP CODE ▲
1	N ▼	ı	Telephone N		ZIP CODE ▲

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h),

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1.		FEC ID number	C
2.		FEC ID number	C
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4.		FEC ID number	C
	L Ourselle Live Affiliated Ourselling Live Food	utatan Banasantatta	
	l Organization, Affiliated Committee, Joint Fundr NG VICTORY FUND	alsing Representative	e, or Leadership PAC Spons
Mailing Address	824 S MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	ative Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) or ((h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
_				
6. N	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	HISPANIC LEADE	ERSHIP TRUST PARTNERSHIP		
		DO DOV 044007		
	Mailing Address	PO BOX 341027		
		AUSTIN	TX	78734
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sponsor
8. D	Designated Agent: Identify	by name, address (phone number – optional)		
8. D	Pesignated Agent: Identify	by name, address (phone number – optional)		
8. D		by name, address (phone number – optional)		
8. D	Full Name	by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
- 8. D	Full Name	CITY A	STATE A	ZIP CODE A
8. D	Full Name	CITY A	STATE A	
9. B s.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mails and the second states of Bank,	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
9. B s.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor afety deposit boxes or mailane of Bank, Depository, etc.	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
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h). Joint Fundraisi		FEC ID number	С
1.		FEC ID number	C
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ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
NRCC MICHIGA		3	.,
Mailing Address	320 1ST STREET, SE		
	WASHINGTON	l DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif	Affiliated Committee Joint y Joint y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
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FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8 and

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ame of Any Connected (Organization, Affilia	ted Committee, Joint Fund	Iraising Representativ	e, or Leadership PAC Spon
NRCC ARIZONA V	/ICTORY			
I				
Mailing Address	228 S. WASHINGT	ON STREET		
	SUITE 115			
	ALEXANDRIA		, , VA	22314
Relationship:		CITY A	STATE A	ZIP CODE ▲
Connected	Organization A	ffiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify	by name, address (phone number - optional)		
Full Name				
Mailing Address				
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TITLE OR POSITION		CITY A	STATE A	ZIP CODE ▲
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	g Participant:		
1.		FEC ID number	C
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4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spor
NRCC CALIFORN	IIA VICTORY 		
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	, , , , , VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Jo	oint Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify	by name, address (phone number - optional)		
Full Name	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY A		
Full Name	CITY A		
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Full Name Mailing Address TITLE OR POSITION anks or Other Depositor aftery deposit boxes or main ame of Bank,	CITY A	STATE A Telephone Number	ZIP CODE A
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1.		FEC ID number	С
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3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funds	raising Representative	e, or Leadership PAC Spon
NRCC FLORIDA	VICTORY		
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA L	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Y Joint y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
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esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	228 S WASHINGTON ST		
	STE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		t Fundraising Representa	ative Leadership PAC Spo
Connecte	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Spo
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Connecte Designated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee Joint Joint by by name, address (phone number – optional) CITY		
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A
Connected Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposites Safety deposit boxes or make the composition of Bank, Depository, etc.	Affiliated Committee y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A

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(h). Joint Fundraisi	ng rantopant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
JOHN JAMES FO	I Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spons
Mailing Address	P.O. BOX 628		
	OT CLAIR SUOPES		40000
	ST. CLAIR SHORES	MI	48080
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint Joint Jo	Fundraising Representa	ative Leadership PAC Spo
		Fundraising Representa	Leadership PAC Spo
Designated Agent: Identi		Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Identi		Fundraising Representation	Leadership PAC Spo
Pesignated Agent: Identi		Fundraising Representation	Leadership PAC Spo
Pesignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representation	
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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
DUARTE VICTO	RY FUND		
<u> </u>			
	A 100 TECNIES BOAR		
Mailing Address	9460 TEGNER ROAD		
	HILMAR 	CA	95324
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mainly and the control of the con	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY To ories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) of

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	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spor
NRCC NEW YOR	K VICTORY 		
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	loint Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify	by name, address (phone number - optional)	
esignated Agent: Identify Full Name	by name, address (phone number – optional)	
	by name, address (phone number – optional		
Full Name	by name, address (phone number – optional		
Full Name	by name, address (phone number – optional		
Full Name	CITY		ZIP CODE A
Full Name	CITY		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or maintenance.	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposition boxes or main arms of Bank,	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposition boxes or main arms of Bank,	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or material deposit boxes or material depository, etc.	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	CITY A	STATE A Telephone Number	ZIP CODE A

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5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	BACON VICTORY	′ FUND		
		OOO O WAQUUNOTON OT		
	Mailing Address	228 S. WASHINGTON ST.		
		STE. 115		
		ALEXANDRIA	VA VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	
8.	Full Name	CITY A		
8. 9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION	CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY CITY Te ies: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma Name of Bank,	CITY CITY Te ies: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mathematical mathematical deposition of the position of the po	CITY CITY Te ies: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mathematical mathematical deposition of the position of the po	CITY CITY Te ies: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\underline{^{202}}$ of $\underline{^{213}}$

5(g) oı	r(h). Joint Fundraisi r	ng Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	=	Organization, Affiliated Committee, Joint Fundra	nising Representative	e, or Leadership PAC Sponsor
	BARRETT BRIGA	ADE VICTORY FUND		
		PO BOX 15221		
	Mailing Address			
				40004
		LANSING	MI	48901
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
-				
8.	Designated Agent: Identif	y by name, address (phone number – optional)	1 1 1 1 1 1 1	
8.	Full Name	y by name, address (phone number – optional)		
- 8.		y by name, address (phone number – optional)		
8.	Full Name			
- 8. I	Full Name	CITY A	STATE A	ZIP CODE A
- 8.	Full Name	CITY A	STATE A	ZIP CODE A
- 8.	Full Name	CITY A	STATE A	
- 9. :	Full Name Mailing Address TITLE OR POSITION	CITY CITY Tel pries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
- 9. :	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or material boxes.	CITY CITY Tel pries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors or mail of Bank, Depository, etc.	CITY CITY Tel pries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors or mail of Bank, Depository, etc.	CITY CITY Tel pries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page $\underline{^{203}}$ of $\underline{^{213}}$

or(h). Joint Fundra i	ising Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
	ted Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
BECKER VICT	ORY COMMITTEE		
Marilia a Astalya a	50 S JONES BLVD STE 201		
Mailing Address			
			20107
	LAS VEGAS	L NV	89107
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name	ntify by name, address (phone number – optional)	1 1 1 1 1 1 1	
	ntify by name, address (phone number – optional)		
Full Name	ntify by name, address (phone number – optional)		
Full Name	ntify by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Ling Address	ON ▼	STATE A	ZIP CODE A
Full Name	ON ▼ CITY ▲ Telesitories: List all banks or other depositories in which telesitories.	lephone Number	
Full Name Mailing Address TITLE OR POSITION Banks or Other Depose safety deposit boxes or Name of Bank, Depository, etc.	ON ▼ CITY ▲ Telesitories: List all banks or other depositories in which telesitories.	lephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi r			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
CAO VICTORY F	'UND		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Represente	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
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esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or materials and the companion of Bank,	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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or(h). Joint Fundrai s	sing Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connector	ed Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
Mailing Address	824 S MILLEDGE AVE.		
Mailing Address	STE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	
Designated Agent: Ider	ntify by name, address (phone number – optional)	I i i i i i i i i i i i i i i i i i i	
Designated Agent: Ider			
Designated Agent: Ider			
Designated Agent: Ider	ntify by name, address (phone number – optional)		
Designated Agent: Ider	ntify by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Iden Full Name Mailing Address	ntify by name, address (phone number – optional) CITY ▲		
Designated Agent: Iden Full Name Mailing Address TITLE OR POSITIO	ntify by name, address (phone number – optional) CITY ▲ CITY ▲ itories: List all banks or other depositories in which to	STATE A	ZIP CODE A
Pull Name Full Name Mailing Address TITLE OR POSITION Banks or Other Deposes safety deposit boxes or Name of Bank, Depository, etc.	ntify by name, address (phone number – optional) CITY ▲ CITY ▲ itories: List all banks or other depositories in which to	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h)

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
BO HINES VICTO	ORY FUND		
	AMA E PROAD OTREET		
Mailing Address	1441 E BROAD STREET		
	#214 		
	FUQUAY VARINA	NC NC	27526
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or marked to the content of the con	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8

Page $\underline{^{207}}$ of $\underline{^{213}}$

n). Joint Fundraising	,		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected (Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Spor
KIRKMEYER VICT	ORY COMMITTEE		
Mailing Address	824 S MILLEDGE AVENUE		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC S
	Organization Affiliated Committee X Joby name, address (phone number – optional)		ative Leadership PAC S
esignated Agent: Identify			Leadership PAC S
esignated Agent: Identify Full Name			ative Leadership PAC S
esignated Agent: Identify Full Name			Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mai	by name, address (phone number – optional) CITY CITY Ces: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	by name, address (phone number – optional) CITY CITY Ces: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Anks or Other Depositor fety deposit boxes or main arme of Bank,	by name, address (phone number – optional) CITY CITY Ces: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or main arme of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY Ces: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
KISTNER VICTO	RY COMMITTEE		
Mailing Address	PO BOX 183		
	HUDSON	wi	54016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Joint Joint by by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi i	1	FEO ID I	C
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
RUDY VICTORY	FUND		
Mailing Address	PO BOX 26141		
	ALEXANDRIA	VA VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ad Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
	Affiliated Committee Joint fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identii Full Name Mailing Address	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name _ _ Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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1.			
		FEC ID number	C
2.		FEC ID number	С
3		FEC ID number	C
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fund ER VICTORY FUND	Iraising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 391		
		l PA l	15044
	GIBSONIA		
	CITY A	STATE ▲ nt Fundraising Representa	ZIP CODE ▲ ative Leadership PAC Sp
Connecte Designated Agent: Identi Full Name	CITY ▲ ed Organization Affiliated Committee ✓ Join		
Connecte Designated Agent: Identi	CITY ▲ ed Organization Affiliated Committee ✓ Join		
Connecte Designated Agent: Identi Full Name	CITY ▲ ed Organization Affiliated Committee ✓ Join		
Connecte Pesignated Agent: Identi Full Name	CITY A ed Organization Affiliated Committee y Join fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
Connecte Designated Agent: Identi Full Name	CITY A ed Organization Affiliated Committee Join fy by name, address (phone number – optional)		

FEC Form 1S (Revised 02/2017)

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(h). Joint Fundraising	Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
TEAM MAYRA	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
Mailing Address	1005 CONGRESS AVENUE		
	SUITE 400		
	AUSTIN		78701
Dolotionohina	CITY	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	ative Leadership PAC Sp
Connected		nt Fundraising Representa	ative Leadership PAC Sp
Connected esignated Agent: Identify	Organization Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify Full Name	Organization Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify Full Name	Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee X Join by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name	Organization Affiliated Committee by name, address (phone number – optional) CITY CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Organization Affiliated Committee Joint Joint Dyname, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	Organization Affiliated Committee Joint Joint Dyname, address (phone number – optional) CITY CITY ies: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisin		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
7.			
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TEAM MONICA V	'ICTORY		
Mailing Address	228 S WASHINGTON STREET		
Mailing Address	SUITE 115		
	ALEXANDRIA	, , VA ,	22314
Relationship:	CITY A	STATE A	ZIP CODE A
P	J	0.7.1.2 =	2 0022 2
Connected	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
	d Organization Affiliated Committee Join Join by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC S
		t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC S
esignated Agent: Identify	by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY To	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depository, etc and and and and and and and and and	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail ame of Bank, epository, etc.	ries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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ı	ng Participant:	FEC ID number	C
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2.		FEC ID number	C
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ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
ZINKE VICTORY	'FUND		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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